

# **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 Details               |                         |                 |                   |  |
|-------------------------------|-------------------------|-----------------|-------------------|--|
| Program Name                  | Program Number          |                 | Program Type      |  |
| ALL ABOUT KIDS CHILDCARE AND  | 00000201413             |                 | Child Care Center |  |
| LEARNING CENTER               |                         |                 |                   |  |
| Address                       |                         |                 | County            |  |
| 6060 RADIO WAY MASON          |                         |                 | WARREN            |  |
| OH 45040                      |                         |                 |                   |  |
|                               |                         |                 |                   |  |
|                               |                         |                 |                   |  |
| Building Approval Date        | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |  |
| 01/10/2017                    | E                       | 240             |                   |  |
| Fire Inspection Approval Date | Food Service Risk Level |                 |                   |  |
| 02/01/2023                    | Level III               |                 |                   |  |

| Inspection Information     |  |                  |                   |              |  |
|----------------------------|--|------------------|-------------------|--------------|--|
| Inspection Type            | Inspection Section Sec | соре             | Inspection Notice |              |  |
| Annual                     | Full   |                  | Unannounced       |              |  |
| Inspection Date 08/02/2023 | Begin Time 8   | 3:20 AM          | End Time 1:15 PM  |              |  |
| Reviewer:                  |  |                  |                   | ,            |  |
| NANCY SCHMITT              |  |                  |                   |              |  |
| Summary of Findings        |  |                  |                   |              |  |
| No. Rules Verified         | No. Rules with Non-compliances   | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 58                         | 11   | 0                | 2                 | 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)                                 |                  | 34         | 0         | 34    |
| Young Toddler   |                  | 21         | 0         | 21    |
| Total Under 2 ½ Years                                     | 64               | 55         | 0         | 55    |
| Older Toddler   |                  | 15         | 0         | 15    |
| Preschool   |                  | 77         | 0         | 77    |
| School Age  |                  | 13         | 0         | 13    |
| Total Capacity/Enrollment                                 | 192              | 105        | 0         | 160   |

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



Department of Education Department of Job and Family Services

| Room 10 | School-Age to < 11 years | 1 to 5  | #1 |
|---------|--------------------------|---------|----|
| Room 10 | School-Age to < 11 years | 1 to 10 | #2 |
| Room 1  | 0 to < 12 months         | 2 to 8  | #1 |
| Room 1  | 0 to < 12 months         | 2 to 10 | #2 |
| Room 2  | 0 to < 12 months         | 2 to 6  | #1 |
| Room 2  | 0 to < 12 months         | 2 to 9  | #2 |
| Room 3  | 12 months to < 18 months | 2 to 9  | #1 |
| Room 3  | 12 months to < 18 months | 2 to 11 | #2 |
| Room 4  | 12 months to < 18 months | 3 to 6  | #2 |
| Room 4  | 12 months to < 18 months | 1 to 4  | #1 |
| Room 5  | 18 months to < 30 months | 2 to 9  | #1 |
| Room 5  | 18 months to < 30 months | 2 to 12 | #2 |
| Room 6  | 30 months to < 36 months | 2 to 9  | #1 |
| Room 6  | 30 months to < 36 months | 2 to 11 | #2 |
| Room 7  | 3 years to < 4 years     | 2 to 9  | #1 |
| Room 7  | 3 years to < 4 years     | 2 to 21 | #2 |
| Room 8  | 3 years to < 4 years     | 2 to 16 | #1 |
| Room 8  | 3 years to < 4 years     | 2 to 21 | #2 |
| Room 9  | School-Age to < 11 years | 1 to 15 | #1 |
| Room 9  | School-Age to < 11 years | 3 to 25 | #2 |

#### **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: 05 Health & Safety



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

<u>Code</u>: Meals and snacks provided or served by the program must include all required food groups and meet the recommended daily dietary allowances as specified by the USDA.

<u>Finding</u>: During the inspection, it was determined that a meal or snack at the program did not meet the requirements as noted in numbers 2 & 5 below:

- 1. The breakfast served did not include foods from three of the four food groups.
- 2. Snacks served did not include foods from two of the four food groups.
- 3. The meal did not provide 1/3 of the recommended daily dietary allowances as specified by the USDA.
- 4. Juice used to meet the fruit or snack component was not 100% undiluted fruit or vegetable juice.
- 5. The meal served did not include an item from the meat or meat alternative group.
- 6. The meal served did not include an item from the bread or grain group.
- 7. The meal served did not include two items from the fruit/vegetable group.
- 8. The meal served did not include a vegetable (two fruits were served).
- 9. The meal served did not include a serving of fluid milk.

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

Corrective Action Plan Due: 09/02/2023

# Domain: 09 Children's Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 numbers 4, 7, 22 & 39 below:

1. No plan was on file.

(Page 1)

- 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.

(Page 2)

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.

(Page 3)

- 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.

(Page 4)

- 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.

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: 09/02/2023



# Low Risk Non-Compliances

## Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

<u>Code</u>: The program staff is required to wash their hands in a sink designated for handwashing. The handwashing sink may not be used for meal preparation.

<u>Finding</u>: During the inspection, it was determined that water used to refill a child's water bottle was taken from a sink used for handwashing. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/02/2023

## Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

<u>Code</u>: The program is required to have all staff and children wash their hands as outlined in rule.

<u>Finding</u>: During the inspection, it was determined that handwashing requirements were not followed as listed in number 9 below, as required in rule.

1. At least one staff/child did not wash their hands upon arrival for the day.

2. At least one staff/child did not wash their hands prior to departure.

3. At least one staff did not wash their hands upon entry into a classroom.

4. At least one staff/child did not wash their hands after toileting or assisting a child with toileting.

5. At least one staff/child did not wash their hands after each diaper change or pull-up change.

6. At least one staff did not wash their hands after contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.

7. At least one child did not wash their hands after contact with bodily fluids.

8. At least one child did not wash their hands after returning inside after outdoor play.

9. At least one staff did not wash their hands after cleaning or sanitizing or using any chemical products.

10. At least one staff/child did not wash their hands after handling pets, pet cages or other pet objects that have come in contact with the pet.



11. At least one staff did not wash their hands before eating, serving or preparing food or bottles or feeding a child.

12. At least one child did not wash their hands before eating or assisting with food preparation.

13. At least one staff did not wash their hands before and after completing a medical procedure or administering medication.

14. At least one child did not wash their hands after water activities.

15. At least one staff/child did not wash their hands when visibly soiled (must use soap and water).

16. Other [ ].

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

Corrective Action Plan Due: 09/02/2023

## Domain: 02 Safe & Sanitary Environment

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

<u>Code</u>: The program is required to provide a clean restroom with the appropriate materials available.

<u>Finding</u>: During the inspection, it was determined that an unsanitary condition, as noted in number 4 below, was in the Room 10 restroom:

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

The restroom(s) must be kept sanitary at all times. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

## Domain: 02 Safe & Sanitary Environment



#### Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

<u>Finding</u>: During the inspection, it was determined that children were not protected from item or condition which may threaten their health, safety, or well-being as noted in number 18 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers.
- 2. Open pull cords that are not closed loop.

3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.

- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Employee(s) purse(s).
- 7. Diaper bags.
- 8. Television not securely anchored.
- 9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 10. Smoke detector needing batteries replaced.
- 11. An area rug did not have a nonskid backing.
- 12. An area rug presented a tripping hazard.
- 13. A floor surface that was unsafe in that [ ].
- 14. No platform was provided for the sink or toilet in the [ ] classroom.
- 15. The platform provided for the sink or toilet in the [ ] classroom was not sturdy.
- 16. The platform provided for the sink or toilet in the [ ] classroom posed a safety hazard in that [ ].
- 17. Telephone cords.
- 18. Staff member stepped over a barrier/gate while holding a child.
- 19. Emergency exits were blocked by the following classroom furniture: [ ].
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Other [ ].

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: 09/02/2023

## Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-08 Child Care Staff Member Educational Requirements <u>Code</u>: The program staff is required to have education documentation translated and shown as equivalent to a high school education.

<u>Finding</u>: In review of the staff records, it was determined that the child care staff member listed on the Employee Record Chart had educational information on file that could not be verified as recognized by the state



board of education or the appropriate agency of another state or country as equivalent to the completion of a high school education. The rule requires a child care staff member to provide evidence of the completion of a high school education. Submit the program's corrective action plan, which includes a copy of the educational information and/or equivalency report, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/02/2023

#### Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 2, 3 & 4 below:

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

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

Corrective Action Plan Due: 09/02/2023

## Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

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

<u>Finding</u>: 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 2, 5 (a) & 6 (a) 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: 09/02/2023

# Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to store medical foods and topical products out of the reach of children.

<u>Finding</u>: During the inspection, it was determined that topical products, sunscreen and diaper cream, were within the reach of children in the restrooms in Room 6. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.



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

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

<u>Finding</u>: In review of 20 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 item in number 6 below.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other [ ]

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

## Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to removed all medication, medical foods and topical products that are no longer being administered or have expired.

<u>Finding</u>: During the inspection, it was determined that a medication had not been removed from the program and had expired. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.



#### **Domain: 10 Written Policies & Procedures**

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

<u>Code</u>: 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.

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

1. Child care staff members and employees were not trained annually.

2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 09/02/2023

# **Rules In-Compliance/Not Verified**

| Rule                             | Status    | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| 5101:2-12-02 License Posted      | Compliant |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection          | Compliant |   |
| Requirements                     |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |



Requirements

Department of Education Department of Job and Family Services

| 000000                                  |                     |  |
|---|---------------------|--|
| 5101:2-12-04 Building Department        | Compliant           |  |
| Inspection                              |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-04 Fire Inspection            | Compliant           |  |
|   |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-04 Food Service               | Compliant           |  |
| Requirements                            |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-07 Administrator              | Compliant           |  |
| Qualifications                          |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-07 Administrator              | Compliant           |  |
| Responsibilities/Requirements           |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-07 Written Program            | Compliant           |  |
| Policies and Procedures                 |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-08 Orientation          | Compliant           | Documenting Statement: On the day of   |
| Training & Whistle Blower Protection    |                     | the inspection, all child care staff<br>members had met orientation training |
|   |                     | requirements.  |
|   |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-09 Background Check     | Compliant           | Documenting Statement: During the  |
| Requirements                            | 3                   | inspection, the required documentation                                       |
|   |                     | regarding background checks was on file<br>for all employees listed.         |
|   |                     | for all employees listed.  |
| 2                                       |                     |  |
| Rule<br>Rule: 5101:2-12-10 Professional | Status<br>Compliant | Documenting Statement(s), If applicableDocumenting Statement: At the time of |
| Development Requirements                | Compliant           | the inspection, all child care staff   |
| •                                       |                     | members had completed the required   |
|   |                     | amount of professional development   |
|   |                     | training.  |
|   |                     |  |
| Rule                                    | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-11 Indoor Space               | Compliant           |  |



Department of Education Department of Job and Family Services

| 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             | Compliant           | Documenting Statement: The outdoor        |
| Requirements                                 |                     | play area is separated from traffic and   |
|  |                     | other hazards by a fence.                 |
|  |                     |   |
| Rule: 5101:2-12-11 Outdoor Space             | Compliant           | Documenting Statement: The quarterly      |
| Requirements                                 |                     | playground inspections were completed     |
|  |                     | and documented, as required. The most     |
|  |                     | recent inspection report form was dated   |
|  |                     | 7/6/2023.                                 |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Outdoor Play Equipment          | Compliant           |   |
|  |                     |   |
| Dula   | Chatria             | Desumenting Statement(a) If emplicable    |
| Rule<br>5101:2-12-11 Outdoor Play Fall Zones | Status<br>Compliant | Documenting Statement(s), If applicable   |
|  | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-12 Safe Equipment                  | Compliant           |   |
|  | 7                   |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Smoke Free                      | Compliant           |   |
| Environment                                  |                     |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-14 Transportation and        | Compliant           | Documenting Statement: Requirements       |
| Field Trip Procedures                        |                     | regarding routine and/or field trips were |
|  |                     | discussed during the inspection. To &     |
|  |                     | from school - public school bus. Field    |
|  |                     | trips - 2 centered owned buses. Use       |
|  |                     | ODJFS sample written permission forms     |
|  |                     | and t-shirts for ID.                      |
| Rule: 5101:2-12-14 Transportation and        | Compliant           | Documenting Statement: The drivers had    |
|  | Compliant           | J. J  |
| Field Trip Procedures                        |                     | current and valid training in first aid,  |
|  |                     | management of communicable disease,       |
|  |                     | and CPR.                                  |
|  |                     |   |
|  |                     |   |



| Rule: 5101:2-12-14 Transportation -<br>Driver Requirements        | Compliant           | Documenting Statement: The drivers had<br>completed the required ODJFS driver<br>training.  |
|---|---------------------|---|
| Rule  | Status              | Documenting Statement(s) If applicable  |
| Rule: 5101:2-12-14 Transportation -<br>Vehicle Requirements       | Compliant           | Documenting Statement(s), If applicableDocumenting Statement: Annual safety<br>checks of the vehicles, using the JFS<br>01230 "Vehicle Inspection Report For<br>Child Care Centers" form, were verified<br>and dated 7/29/2022 (both vehicles). The<br>inspections were expired however, the<br>vehicles had not been used to transport<br>children since the date of expiration.<br>Updated inspections of both vehicles will<br>be completed before used by the<br>program to transport children. |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Medical, Dental,<br>and General Emergency Plan | Compliant           | Documenting Statement: On the day of<br>the inspection, the complete prescribed<br>JFS 01242 "Medical, Dental, and General<br>Emergency Plan For Child Care" were<br>posted in the program as required.   |
| Dula  | Chatura             |   |
| Rule: 5101:2-12-16 Emergency Drills                               | Status<br>Compliant | Documenting Statement(s), If applicableDocumenting Statement: Documentationfor completed fire, weather, andemergency/lockdown drills was verifiedduring this inspection.  |
|   |                     |   |
| Rule<br>5101:2-12-16 First Aid/Standard<br>Precautions            | Status<br>Compliant | Documenting Statement(s), If applicable   |
| Dula  | Chatura             |   |
| Rule<br>Rule: 5101:2-12-16 Management of<br>Communicable Disease  | Status<br>Compliant | Documenting Statement(s), If applicable<br>Documenting Statement: The JFS 08087<br>"Communicable Disease Chart" was<br>posted and was readily available to staff<br>and parents.  |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Incident/Injury<br>Reporting                         | Compliant           |   |



| Status<br>Compliant<br>Status<br>Compliant | Documenting Statement(s), If applicable           Documenting Statement: Daily schedules           were observed posted.           Documenting Statement(s), If applicable           Documenting Statement(s), If applicable           Documenting Statement: Sufficient           opplication |
|--|--|
| Status                                     | were observed posted.           Documenting Statement(s), If applicable           Documenting Statement: Sufficient  |
|  | Documenting Statement(s), If applicable<br>Documenting Statement: Sufficient   |
|  | Documenting Statement: Sufficient  |
|  | Documenting Statement: Sufficient  |
| Compliant                                  |  |
|  | aguinment was cheening in all actors   |
|  | equipment was observed in all categories.  |
|  |  |
|  |  |
| Status                                     | Documenting Statement(s), If applicable  |
| Compliant                                  |  |
|  |  |
| Status                                     | Documenting Statement(s), If applicable  |
| Compliant                                  |  |
|  |  |
|  |  |
| Status                                     | Documenting Statement(s), If applicable  |
| Compliant                                  | Documenting Statement: Staff/child   |
|  | ratios observed during the inspection  |
|  | were in compliance.  |
|  |  |
| <b>C</b> 1 1                               |  |
|  | Documenting Statement(s), If applicable  |
| Compliant                                  |  |
|  |  |
| Status                                     | Documenting Statement(s), If applicable  |
| Compliant                                  |  |
|  |  |
|  |  |
| Status                                     | Documenting Statement(s), If applicable  |
| Compliant                                  |  |
|  |  |
| Status                                     | Documenting Statement(s), If applicable  |
|  |  |
| phone                                      |  |
|  |  |
| Status                                     | Documenting Statement(s), If applicable  |
| Compliant                                  |  |
|  |  |
| -  | _  |
| Status                                     | Documenting Statement(s), If applicable  |
| Compliant                                  | Documenting Statement: Cribs were  |
|  | separated from the play space by a safe  |
|  | and sturdy and physical barrier.   |
|  | Compliant Status Compliant   |



| 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  |
| 5101:2-12-22 Fluid Milk Requirements | Compliant |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-22 Safe Food               | Compliant |  |
| Handling/Storage                     |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-23 Infant Daily Care       | Compliant |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were  |
| Food Preparation                     |           | labeled as required.   |
|                                      |           | 25   |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-23 Diapering and Toilet    | Compliant |  |
| Training                             |           |  |
|                                      | •         | ·  |
|                                      |           |  |