

## 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<br>SHERWOOD ELEMENTARY YMCA CHILD CARE | Program Number<br>000000202873    |                 | Program Type<br>Child Care Center |
| Address<br>7080 GRANTHAM WAY CINCINNATI OH<br>45230 |                                   |                 | County<br>HAMILTON                |
|   |                                   |                 |                                   |
| Building Approval Date                              | Use Group/Code<br>School Building | Occupancy Limit | Maximum Under 2 ½                 |
| Fire Inspection Approval Date                       | Food Service Risk Level<br>Exempt |                 |                                   |

| Inspection Information        |                                      |                          |                        |                                  |
|-------------------------------|--------------------------------------|--------------------------|------------------------|----------------------------------|
| Inspection Type<br>Annual     |                                      | Inspection Scope<br>Full |                        | Inspection Notice<br>Unannounced |
| Inspection Date<br>12/12/2024 |                                      | Begin Time<br>7:10 AM    |                        | End Time<br>8:15 AM              |
| Reviewer:<br>BRIAN CHASTAIN   |                                      |                          |                        |                                  |
| Summary of Findings           |                                      |                          |                        |                                  |
| No. Rules Verified<br>58      | No. Rules with Non-compliances<br>13 | No. Serious Risk<br>0    | No. Moderate Risk<br>3 | No. Low Risk<br>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     |
| <b>Total Under 2 ½ Years</b>                              | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 67        | 67    |
| <b>Total Capacity/Enrollment</b>                          | 54               | 0          | 67        | 67    |

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

|            |                          |         |  |
|------------|--------------------------|---------|--|
| School Age | School-Age to < 11 years | 2 to 4  |  |
| School Age | School-Age to < 11 years | 3 to 22 |  |

### 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: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: 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.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined the program did not protect children from an unsafe item, condition or equipment noted in number 4 below:

1. Closed ended pull cord(s) on the window blind(s)
2. Extension cord(s); electrical cord(s) attached to an object that could result in a severe injury if pulled.
3. Stacked tables.
4. Folding tables.
5. Matches and/or a lighter.
6. Power tool(s).
7. Live wires.
8. Stove(s) that are either on or able to be turned on by a child.
9. Asbestos.
10. Traffic.
11. A body of water.

12. A well.
13. Environmental hazard(s) confirmed by local authorities having jurisdiction over the hazard.
14. A crockpot used to heat bottles.
15. Immediate access to a knife.
16. Large or heavy pieces of shelving units are not securely anchored to the wall.
17. Other [ ].

Any hazardous equipment must be removed, replaced, or repaired and any hazardous condition must be corrected and must be made inaccessible to children. Provide staff training. Submit the program's corrective action plan, which includes a statement that the item or condition has been removed and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/12/2025

#### **Domain: 08 Staff Files**

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

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Finding: During the inspection, it was determined that child care staff member(s) had neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer work near children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/12/2025

#### **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 numbers 27, 28, 30 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: 01/12/2025

#### Low Risk Non-Compliances

##### Domain: 03 Postings & Equipment

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

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number 2 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing the weather details from the program's disaster plan.
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 01/12/2025

##### Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

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

Finding: During the inspection, it was determined that the required drills were not documented for item numbers 1, 2, 3 below:

1. Monthly fire drills.
2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 01/12/2025

#### **Domain: 06 Program Information**

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

Code: The program is required to have all drivers be an employee of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program.

Finding: During the inspection, it was determined that the requirements for drivers was not met as listed in number 1 below:

1. The driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.
2. At least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.
3. The driver used to transport children was not an employee of the program, a public transportation driver, or employed by a company contracted to provide transportation service.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/12/2025

#### **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 numbers 1, 2, 3, 5 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: 01/12/2025

#### **Domain: 08 Staff Files**

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

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training listed in number 10 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of [ ] and [ ] did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
5. CPR – child care staff scheduled during the hours of [ ] and [ ] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [ ] and [ ] had expired training
10. Communicable Disease – child care staff scheduled during the hours of 7:00-9:00 AM and 3:30-6:00 PM did not have verification of current Communicable Disease training

11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
13. Child Abuse – child care staff scheduled during the hours of [ ] and [ ] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/12/2025

**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 member(s) 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: 01/12/2025

**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: 01/12/2025

#### **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 number 5 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: [ ]

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

Corrective Action Plan Due: 01/12/2025

**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 number 1 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: 01/12/2025

**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: 01/12/2025

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

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

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

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

##### Procedures:

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

##### Details:

10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
11. A designated safe site where staff and children can safely remain when evacuated.
12. Assisting infants, toddlers and children with special needs and/or health conditions
13. Emergency contact information for parents and the program
14. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
15. Procedures for communicating with parents during loss of communications, no phone or internet service available
16. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
17. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip



- 18. Making the plan available to all child care staff members and employees
- 19. Training of staff or reassignment of staff duties as appropriate
- 20. Updating the plan on a yearly basis
- 21. Contact with local emergency management officials

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

Corrective Action Plan Due: 01/12/2025

#### Rules In-Compliance/Not Verified

| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| Rule: 5101:2-12-02 License Posted                 | Compliant | Documenting Statement: The license was in a location visible to parents as required.                                     |
| Rule  | 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 Requirements              | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Building Department Inspection | Compliant | Documenting Statement: This program serves only school age children in a public or chartered non-public school building. |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Fire Inspection                | Compliant | Documenting Statement: This program serves only school age children in a public or chartered non-public school building. |

| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| 5101:2-12-04 Food Service Requirements               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator Qualifications            | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Written Program Policies and Procedures | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space Requirements               | Compliant |   |
| 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 10/3/24. |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Outdoor Play Equipment                  | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Outdoor Play Fall Zones                 | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-12 Safe Equipment                    | Compliant | Documenting Statement: Equipment was observed to be in good condition.  |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Sanitary Equipment and Environment      | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Handwashing Requirements          | Compliant | Documenting Statement: Staff and children were observed washing hands as required by the rule.  |
| Rule   | Status    | Documenting Statement(s), If applicable   |
|  |           |   |

|   |               |  |
|---|---------------|--|
| 5101:2-12-13 Smoke Free Environment                     | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-14 Transportation and Field Trip Procedures   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-14 Transportation - Vehicle Requirements      | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records | 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. |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-16 First Aid/Standard Precautions             | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 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.                               |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-16 Incident/Injury Reporting                  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 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.   |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| Rule: 5101:2-12-17 Materials and Equipment              | Compliant     | Documenting Statement: Sufficient equipment was observed in all categories.  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-17 Daily Outdoor Play                         | Compliant     |  |



| Rule                                     | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5101:2-12-18 License Capacity      | Compliant | Documenting Statement: The program was operating within license capacity limits.  |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 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: 5101:2-12-18 Ratio                 | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance.  |
| 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                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-18 Attendance Records          | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Supervision                 | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Child Guidance              | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Meal and Snack Requirements | Compliant |   |
| 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 Handling/Storage  | Compliant |   |



**Department of  
Children & Youth**

| Rule                                   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-12-25 Medication Administration | Compliant |   |