

# **Center Licensing Inspection Full Report**

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

	Program Deta	ils	
Program Name	Program Number		Program Type
GLORIA DEI TLC PRESCHOOL	000000205495		Child Care Center
Address	19		County
5841 WERK ROAD CINCINNATI			HAMILTON
ОН			
45248			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Le	evel	
07/14/2024	Level II		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date	Begin Time		End Time	
11/14/2024	9:00 AM		10:30 AM	
Reviewer:				
Kristin Blassingame				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	5	0	1	6

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		0	29	29
School Age		0	0	0
Total Capacity/Enrollment	53	0	29	29

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



Fours	4 years to < 5 years	1 to 6	
Fours	4 years to < 5 years	1 to 6	
Three's	3 years to < 4 years	2 to 5	
Three's	3 years to < 4 years	2 to 5	
Fives	5 years to < Kindergarten	1 to 6	
Fives	5 years to < Kindergarten	1 to 6	

## **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
No Serious Kisk Non-Compilances were observed during this hispection

## **Moderate Risk Non-Compliances**

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 38, 44 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.



44. Medication listed in the procedures to follow was expired.

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: 12/14/2024

## **Low Risk Non-Compliances**

## Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to store chemicals and cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.

<u>Finding</u>: During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was not used or stored properly as noted in number 2 below:

- 1. Cosmetics were accessible to children in the [ ] area.
- 2. Disinfecting wipes were accessible to children in the classrooms.
- 3. Fish food was accessible to children in the [ ] area.
- 4. Hand lotion was accessible to children in the [ ] area.
- 5. Hand sanitizer (for children under 24 months) was accessible to children in the [ ] area.
- 6. Laundry detergent was accessible to children in the [ ] area.
- 7. Powder dish washing soap was accessible to children in the [ ] area.
- 8. Paint cans were accessible to children in the [ ] area.
- 9. White out was accessible to children in the [ ] area.
- 10. Potting Soil was accessible to children in the [ ] area.
- 11. Other potentially hazardous substance [ ] was accessible to children in the [ ] area.
- 12. Cleaning/sanitizing supplies had not been clearly labeled.
- 13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
- 14. A spray aerosol was used in the [ ] group while children were in attendance.
- 15. Other: [ ].

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

Corrective Action Plan Due: 12/14/2024



**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.

<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 1 and 5c 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: 12/14/2024

#### **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 numbers 4 and 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: 12/14/2024

#### **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.

<u>Finding</u>: 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(s) listed in number 9 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 9:30 am and 12:00 pm had expired training
- 10. Communicable Disease child care staff scheduled during the hours of [ ] and [ ] had not taken 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: 12/14/2024

#### Domain: 09 Children's Files

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

 $\underline{\text{Code}}$ : The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

<u>Finding</u>: 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 6,10, and 15 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: 5101:2-12-15 Child Medical and Enrollment Records

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

<u>Finding</u>: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 1 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. The date of the exam was more than 13 months prior to the date the form was signed.
- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases
- required by division 5104.014 of the Revised Code and found in appendix A to this rule
- 10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions

11. Other [ ]

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

Corrective Action Plan Due: 12/14/2024

## Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	



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-		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	(-),
3101.2 12 02 current information	Compliant	
- 1	-	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
•		
Rule	Status	Documenting Statement(s), If applicable
	+	Bocumenting Statement(s), if applicable
5101:2-12-04 Building Department	Compliant	
Inspection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	
310112 12 0 Fine hispection	Simplication	
	<u>I</u>	
D.I.		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service	Compliant	
Requirements		
•	1	
Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(S), if applicable
5101:2-12-05 Denial, Revocation and	Compliant	
Suspension		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
500 W 92W	Compilant	
Responsibilities/Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures	·	
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D.J.	C+-+	December Chatanana (1) If an II all
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
_		members had met orientation training
		requirements.
		requirements.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-09 Background Check	Compliant	Documenting Statement: During the
Requirements		inspection, the required documentation
Transfer and the second		regarding background checks was on file
		for all employees listed.
-		
Rule	Status	Documenting Statement(s), If applicable



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5101:2-12-10 Professional	Compliant	
Development Requirements	*	
		<u>.</u>
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Indoor Space	Compliant	Documenting Statement: The restrooms
	Compliant	ACC THE STREET SHOULD BE A STREET STR
Requirements		are used exclusively by the program.
	1	
	16	
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	Compliant	( )
Environment	33p.ia	
Environment		
Rule	Ctatus	Decumenting Statement(s) If annice his
	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Smoke Free	Compliant	Documenting Statement: A notice was
Environment	100	observed posted stating that smoking is
		prohibited at the program.
		Didilibited at the Didgiani,
		prombited at the program.
		prombited at the program.
Rule	Status	
Rule Rule: 5101:2-12-16 Medical Dental	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental,	Status Compliant	Documenting Statement(s), If applicable  Documenting Statement: During the
	. 1000000000000000000000000000000000000	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule
Rule: 5101:2-12-16 Medical, Dental,	. 1000000000000000000000000000000000000	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general
Rule: 5101:2-12-16 Medical, Dental,	. 1000000000000000000000000000000000000	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule
Rule: 5101:2-12-16 Medical, Dental,	. 1000000000000000000000000000000000000	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general
Rule: 5101:2-12-16 Medical, Dental,	. 1000000000000000000000000000000000000	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.
Rule: 5101:2-12-16 Medical, Dental,	. 1000000000000000000000000000000000000	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.  Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.
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Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.  Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and
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Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan  Rule Rule: 5101:2-12-16 Emergency Drills	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.  Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan  Rule Rule: 5101:2-12-16 Emergency Drills  Rule	Status Compliant Status Status	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.  Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan  Rule Rule: 5101:2-12-16 Emergency Drills  Rule Rule: 5101:2-12-16 First Aid/Standard	Status Compliant	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.  Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable  Documenting Statement: During the
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan  Rule Rule: 5101:2-12-16 Emergency Drills  Rule	Status Compliant Status Status	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.  Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the program had complete
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan  Rule Rule: 5101:2-12-16 Emergency Drills  Rule Rule: 5101:2-12-16 First Aid/Standard	Status Compliant Status Status	Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.  Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable  Documenting Statement: During the
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	1 2	
Rule: 5101:2-12-16 Management of	Compliant	Documenting Statement: The JFS 08087
Communicable Disease		"Communicable Disease Chart" was
		posted and was readily available to staff
		and parents.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
reporting	ļ.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	2
STOTIZ TZ T/ Bully Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	generally statement (2), in approach
3101.2 12 10 Electrise capacity	Compliant	
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.
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes
	Compilant	observed on the day of the inspection
		were in compliance.
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Attendance		Documenting Statement: Child Care Staff
	Compliant	
Records		Members were observed recording the
		attendance for each child upon arrival
		and documenting each child's departure.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Child Guidance	Compliant	Documenting Statement: Appropriate
		child guidance techniques and practices



		were observed being used during the inspection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication	Compliant	Bocumenting Statement(s), if applicable
Administration	Compliant	
Rule	Status	D
Rule: 5101:2-12-08 Child Care Staff	Compliant	Documenting Statement(s), If applicable  Documenting Statement: All Child Care
	Compliant	Staff Members had verification of
Member Educational Requirements		
		educational requirements on file at the
		program.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster	Compliant	Documenting Statement: Annual training
Plan	Compilant	of the written disaster plan was
riali		completed by staff.
	l .	COMPLETED BY STAIL.