

# **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	nils	
Program Name	Program Number		Program Type
HYDE PARK TODDLER ENRICHMENT GROUP	000000206522		Child Care Center
Address 3799 HYDE PARK AVE CINCINNATI OH 45209			County HAMILTON
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
07/28/2009	E with I-2	35	
Fire Inspection Approval Date	Food Service Risk Level		
11/16/2021	Exempt		

	Inspection Information				
Inspection Type	Inspection Sc	cope	Inspection Notice		
Annual	Full		Unannounced		
Inspection Date 01/13/2022	Begin Time 8	:50 AM	End Time 10:00 AM		
Reviewer: BRIAN CHASTAIN					
DIVIAN CHASTAIN					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
58	12	0	1	16	

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		7	0	7
Total Under 2 ½ Years	14	7	0	7
Older Toddler		5	0	5
Preschool		15	0	15
School Age		1	0	1
Total Capacity/Enrollment	22	21	0	28

Staff-Child Ratios at the Time of Inspection				
Group	Age Group/Range	Ratio Observed	Comment	
Toddler	18 months to < 30 months	2 to 9		

Toddler	18 months to < 30 months	2 to 9	
Preschool 2	3 years to < 4 years	1 to 8	
Preschool 2	3 years to < 4 years	1 to 8	

# **Summary of Non-Compliances**

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

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

# **Moderate Risk Non-Compliances**

**Domain: 08 Staff Files** 

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

<u>Code</u>: The program is required to receive a preliminary approval from ODJFS prior to allowing an individual to

engage in assigned duties or be near children.

<u>Finding</u>: During the inspection, it was determined that individual(s) had engaged in assigned duties or were near children and neither preliminary approval from ODJFS nor the JFS 1176 was on file as required. Submit the program's corrective action plan, which includes a statement that the approval is now on file or the individual(s) are no longer engaged in assigned duties and are not near children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/18/2022



# **Low Risk Non-Compliances**

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

<u>Finding</u>: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number 4 below:

- 1. There was no method in place;
- 2. The method did not include each child's name;
- 3. The method did not include each child's date of birth;
- 4. The tracking method did not remain with the group at all times;
- 5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 02/18/2022

### **Domain: 03 Postings & Equipment**

<u>Rule</u>: 5101:2-12-16 Medical, Dental, and General Emergency Plan Code: The program is required to post the fire and weather plans.

<u>Finding</u>: 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 details noted in paragraph H of the rule.
- 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: 02/18/2022

# **Domain: 03 Postings & Equipment**

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

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency

Plan" when necessary.

<u>Finding</u>: During the inspection, it was determined the requirements for the JFS 01242 Medical, Dental, and General Emergency Plan for Child Care were not followed as noted in number 8 below:

- 1. The plan was not posted in each classroom.
- 2. The plan was not posted in other spaces used by children.
- 3. The name, address and telephone number of the program were not complete.
- 4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
- 5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
- 6. Location of children's records was not complete.
- 7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
- 8. The current version of the prescribed form was not used.
- 9. The plan was not implemented when necessary in that [ ].

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

Corrective Action Plan Due: 02/18/2022

# **Domain: 03 Postings & Equipment**

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

<u>Code</u>: The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.

<u>Finding</u>: During the inspection it was determined that the current JFS 01201 Dental First Aid was not posted in a location readily available to center staff and parents as required. 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: 04 Indoor/Outdoor Space** 

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to conduct and document quarterly inspections of their outdoor play space.

<u>Finding</u>: During the inspection, it was determined that quarterly inspections of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 Child Care Playground Inspection Report form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/18/2022

### **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 numbers 2, 5 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 8:45 AM-12:45 PM 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 8:45 AM-12:45 PM 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 [ ] 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: 02/18/2022

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

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

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

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

- 1. The child care staff 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: 02/18/2022

# Domain: 08 Staff Files

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

<u>Code</u>: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

<u>Finding</u>: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number 2 below:

- 1. The JFS 01176 Program Notification of Background Check Review for Child Care the program received from the Department was not on file and the individual was not left alone with children.
- 2. The JFS 01177 Individual Notification of Background Check Review for Child Care was on file instead of the JFS 01176.
- 3. The JFS 01176 on file was for a different program.



Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/18/2022

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

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

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

<u>Finding</u>: In review of the staff records, it was determined that verification of a high school education was not on file for the child care staff member listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/18/2022

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

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number 4.

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that 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);
- 4. Tuberculosis (TB) screening/test
- 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 4a;
- 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: 02/18/2022

# Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that completed medical examination statements for the employees listed on the Employee Record Chart were not on file, as required by this rule. Submit the program's corrective action plan, which includes copies of the completed employee medical statements, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/18/2022

# Domain: 08 Staff Files

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

<u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional

Registry.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number 4, 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: 02/18/2022

## **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.

<u>Finding</u>: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number 1 below:

- 1. Within 30 days of starting employment at the program as a child care staff member.
- 2. No documentation of completing the training after December 31, 2016.
- 3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 02/18/2022

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

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

<u>Code</u>: The program is required to have a written disaster plan.

<u>Finding</u>: During the inspection, it was determined the program's written disaster plan was missing the information in number 17 below:

#### Procedures:

- 1. The written disaster plan had not been completed
- 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. Assisting infants and children with special needs and/or health conditions
- 12. Emergency contact information for parents and the program
- 13. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
- 14. Procedures for communicating with parents during loss of communications, no phone or internet service available
- 15. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
- 16. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
- 17. How the plan is made available to all child care staff members and employees
- 18. Training of staff or reassignment of staff duties as appropriate
- 19. Updating the plan on a yearly basis
- 20. 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: 02/18/2022

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

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program is required to provide appendix C to all parents of the children enrolled.

<u>Finding</u>: During the inspection, it was determined that parent(s) of the children enrolled in the program were not provided with a copy of Appendix C to the current rule. 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: 5101:2-12-07 Written Program Policies and Procedures

<u>Code</u>: The program's policies and procedures are required to include all topics outlined in rule.

<u>Finding</u>: During the inspection, it was determined the program's written policies and procedures provided to the parents/guardians and employees was missing item numbers 14, 15, 20 below:

#### General Information

- 1. Program name, address, email address and telephone number.
- 2. Description of the program's program philosophy.
- 3. Days and hours of operation, scheduled closings and basic daily schedule.
- 4. Staff/child ratios and group size.
- 5. Opportunities for parent involvement in program activities.
- 6. Opportunities for parents to meet with teachers regarding their child.
- 7. Payment schedule, overtime charges and registration fees as applicable.
- 8. Supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

# **Program Policies and Procedures**

- 9. Enrollment including required enrollment information.
- 10. Care of children without immunizations.
- 11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
- 12. Supervision of children, including a separate supervision policy for school-age children, if applicable.
- 13. Child guidance.
- 14. Suspension and expulsion.
- 15. Compliance with the Americans with Disabilities Act (ADA), including administering medication to children with disabilities and administering care procedures to children with disabilities.
- 16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.)
- 17. Food and dietary policy, including, information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals and snacks, and a policy on providing supplemental food.
- 18. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
- 19. Summary of procedures taken in the event of an emergency, serious illness or injury.
- 20. Administration of medication and topical products including medical foods, modified diets and whether school age children are permitted to carry their own medication and ointments.
- 21. Transportation for fieldtrips, routine trips (if applicable) and emergencies, including if the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
- 22. Water activities/swimming.
- 23. Infant care, if applicable, including feeding, frequency of diaper checks and information about daily activities.
- 24. Sleeping, Napping and Resting.
- 25. Evening and overnight care, if applicable.
- 26. Policy on hours of operation including closing due to weather, school delays or closings and any other factors.
- 27. Situations that may require disenrollment of a child, if applicable.
- 28. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the child care program.



29. Formal screenings and assessments on enrolled children and if the program reports child level data to ODJFS pursuant to 5101:2-17-02 of the Administrative Code.

Revise the program's written policies and procedures to include the missing information. Submit the program's corrective action plan, which includes the revised written policies and procedures, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/18/2022

# **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
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		
<u>-</u>	•	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	Bocamenting statement(s), it applicable
Requirements	Compilant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children	Compliant	bocumenting statement(3), if applicable
Under 2 1/2 Years	Compliant	
Officer 2 1/2 rears		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment		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	bocumenting statement(3), if applicable
3101.2-12-11 Outdoor Flay Fair Zones	Compliant	
	l	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-12 Safe Equipment	Compliant	Documenting Statement: Equipment was
Maler 310112 12 12 sale Equipment	Compilant	observed to be in good condition.
		observed to be in good condition.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and	Compliant	-
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements	'	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	J (" 11
Environment	'	
L	1	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and	Compliant	Documenting Statement: At the time of
Enrollment Records		the inspection, 25% of the children's
		records were reviewed, and the records
		were complete, as required by the rule.
		Trailer somplete, as required by the fall.
	l	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: At the time of
Care Plans	Joniphane	the inspection, there were no children
		currently enrolled who had health
		conditions.
		conditions.

Beginning!		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
		for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
		during this hispection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	bocumenting statement(s), it applicable
	Compliant	
Precautions		
	1.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting	·	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules
Naic. 3101.2 12 17 bany schedule	Compilant	were observed posted.
		were observed posted.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and		bocumenting statement(s), it applicable
	Compliant	
Equipment		
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
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
1.d.c. 3101.2 12 10 Natio	Compilant	ratios observed during the inspection
		were in compliance.

Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Rule: 5101:2-12-25 Medication Compliant Documenting Statement: There were no	- •	-	
Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  Status Rule Status Documenting Statement(s), If applicable  Rule: 5101:2-12-25 Medication Administration Compliant Documenting Statement: There were no children on medication at the time of the inspection; however, the method of storage and practices for the	Rule	Status	Documenting Statement(s), If applicable
Rule Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  Status Training  Rule Rule: Status Documenting Statement(s), If applicable  Compliant Documenting Statement: There were no children on medication at the time of the inspection; however, the method of storage and practices for the	5101:2-12-18 Group Size	Compliant	
Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  Status Training  Rule Rule: 5101:2-12-25 Medication Administration  Status Documenting Statement(s), If applicable Documenting Statement: There were no children on medication at the time of th inspection; however, the method of storage and practices for the	,	•	
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Rule Status Documenting Statement(s), If applicable  Training  Rule Status Documenting Statement(s), If applicable  Training  Rule Rule: 5101:2-12-25 Medication Administration  Compliant Documenting Statement(s), If applicable Compliant Documenting Statement: There were no children on medication at the time of the inspection; however, the method of storage and practices for the			
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