

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 Deta | nils | |
|---------------------------------|-------------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| LOVING CUP KIDS ACADEMY OF | 00000300351 | | Child Care Center |
| RICHMOND HTS | | | |
| Address | | | County |
| 215 RICHMOND RD RICHMOND HEIGHT | | | CUYAHOGA |
| OH 44143 | | | |
| | | | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| 04/17/2019 | E | 99 | |
| Fire Inspection Approval Date | Food Service Risk Level | | |
| 03/22/2022 | Level III | | |

| | Insp | ection Information | | |
|----------------------------|--------------------------------|--------------------|-------------------|--------------|
| Inspection Type | Inspection S | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date 02/09/2023 | Begin Time 9 | 9:20 AM | End Time 1:00 PM | |
| Reviewer: | • | | | |
| REBECCA KOTEWI | REBECCA KOTEWICZ | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 56 | 9 | 0 | 2 | 7 |

| Li | cense Capacity ar | nd Enrollme | ent at the Time of In | spection |
|---------------------------|-------------------|-------------|-----------------------|----------|
| Age Group | License Capacity | | Enr | ollment |
| | Totals | Full Time | Part Time | Total |
| Infant (Birth to < 18 m) | | 6 | 0 | 6 |
| Young Toddler | | 1 | 0 | 1 |
| Total Under 2 ½ Years | 80 | 7 | 0 | 7 |
| Older Toddler | | 9 | 0 | 9 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 130 | 9 | 0 | 16 |

| S | taff-Child Ratios at the Time of Ins | ection | |
|-------|--------------------------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |

| Infants | 0 to < 12 months | 1 to 6 | Arrival |
|----------|--------------------------|---------|---------|
| Infants | 0 to < 12 months | 2 to 6 | |
| Toddlers | 18 months to < 30 months | 2 to 10 | |
| Toddlers | 18 months to < 30 months | 2 to 10 | |

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

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

<u>Finding</u>: During the inspection, a ratio of 1 child care staff member(s) for 6 children was determined to have occurred for the infants group when the situation in number(s) 1 below occurred:

- 1. A child care staff member stepped out of the room.
- 2. A child care staff member had not arrived at work on time.
- 3. Children were present who were not scheduled to be there.
- 4. A child care staff member was unable to work.
- 5. A child was injured in that group.
- 6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
- 7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
- 8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
- 9. Ratio was doubled for more than two hours while children were napping.



- 10. Ratio was doubled while children were napping for a group that included at least one infant.
- 11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
- 12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
- 13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
- 14. The child care staff member did not return to the group after allowing access to the school age only program.
- 15. Other [].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/12/2023

Domain: 09 Children's Files

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

<u>Code</u>: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

<u>Finding</u>: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1 below:

- 1. No plan was on file. Treenut, peanut, shellfish allergy.
- 2. Child's name was missing.
- 3. Child's date of birth was missing.
- 4. Name of the condition was missing.
- 5. Indication if medication is required was missing.
- 6. Symptoms to watch for were missing.
- 7. Directions for when should the medication or medical food be administered were missing.
- 8. Instructions for administration were missing.
- 9. Conditions that trigger the need for medication or medical foods were missing.
- 10. Expected results of the medication or medical food were missing.
- 11. Actions to be taken if the symptoms do not subside were missing.
- 12. Activities, foods, environmental conditions to avoid were missing.
- 13. Training instructions were missing.
- 14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.

- 15. Instructions regarding emergency evacuation, if applicable, were missing.
- 16. Dated signature of parent was missing.
- 17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
- 19. Dated signature(s) of administrator was missing.
- 20. Name of any applicable medication was missing.
- 21. Date medication was administered was missing.
- 22. Time medication was administered was missing.
- 23. Dosage administered was missing.
- 24. Signature of staff member who administered the medication was missing.
- 25. 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.
- 26. The plan was not implemented.
- 27. The plan was not able to be implemented due to conflicting information.
- 28. The plan was not followed.

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: 03/12/2023

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all staff wash their hands as outlined in rule.

<u>Finding</u>: During the inspection, it was determined that at least one staff member with the infant group did not wash his or her hands at the time listed in number(s) 4 below, as required in rule.

- 1. Upon arrival for the day.
- 2. Prior to departure.
- 3. Upon entry into a classroom.
- 4. After toileting or assisting a child with toileting.
- 5. After each diaper change or pull-up change.
- 6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
- 7. After cleaning or sanitizing or using any chemical products.

- 8. After handling pets, pet cages or other pet objects that have come in contact with the pet.
- 9. Before eating, serving or preparing food or bottles or feeding a child.
- 10. Before and after completing a medical procedure or administering medication.
- 11. When visibly soiled (must use soap and water).
- 12. Other [].

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

Corrective Action Plan Due: 03/12/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

<u>Finding</u>: 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 that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 12 below:

- 1. Open pull cords that are not closed loop.
- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 4. Stacked chairs.
- 5. Employee(s) purse(s).
- 6. Diaper bags.
- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [].
- 12. Other barrier around cribs is broken and poses a safety risk.

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/12/2023

Domain: 06 Program Information

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

<u>Code</u>: The program is required to complete and document weekly inspections of vehicles used to transport

children.

<u>Finding</u>: During the inspection, it was determined that the program had not performed and/or documented weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

- 1. A visual inspection of the tires for wear and tire pressure
- 2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges
- 3. An inspection for properly functioning child and driver restraints
- 4. An inspection for properly functioning doors and windows
- 5. An inspection for, and cleaning of, debris from inside the vehicle

Submit the program's corrective action plan, which includes a copy of the documented weekly inspection of vehicles, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/12/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Daily Care

<u>Code</u>: The program is required to provide a daily written record for each infant in care to the parents when picking up the infant each day.

<u>Finding</u>: During the inspection, it was determined that there was no daily written record for each infant provided to the parent or person picking up the infant on a daily basis. 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: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: 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(s) 3 c.

- 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: 03/12/2023

Domain: 09 Children's Files

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

<u>Code</u>: 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(s) 9 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: 03/12/2023

Domain: 10 Written Policies & Procedures

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

Code: 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 number(s)5, 6, 10, 16, 17, 21, 29 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: 03/12/2023

Rules In-Compliance/Not Verified

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

| Rule | | | |
|--|--------------------------------------|-----------|---|
| Rule Status Documenting Statement(s), If applicable | Rule | Status | Documenting Statement(s), If applicable |
| Rule Status Documenting Statement(s), If applicable | 5101:2-12-02 Current Information | Compliant | |
| Rule | | | |
| Rule Status Documenting Statement(s), If applicable | | | |
| Rule | | | Documenting Statement(s), If applicable |
| Rule Status Documenting Statement(s), If applicable Department Inspection Status Documenting Statement: On the day of the inspection, the program was operating in compliance with the current building approval(s). Rule Rule: 5101:2-12-04 Fire Inspection Compliant Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 3/22/23. Rule Rule: 5101:2-12-04 Food Service Requirements Compliant Documenting Statement: The food service license was observed posted. Following in the audit number and date of expiration: MJAECBPQCO, March 1, 2023. Rule Status Documenting Statement: The food service Status Documenting Statement: The food service Compliant Statement: The food service Status Documenting Statement: The food service Status Documenting Statement: The food service Status Documenting Statement (s), If applicable Status Documenting Statement(s), If applicable Status Documenting Statement Status Documenting Statement Status Documenting Statement Status Documenting Statement Status D | 5101:2-12-03 Inspection | Compliant | |
| Rule: 5101:2-12-04 Building Department Inspection Compliant Documenting Statement: On the day of the inspection, the program was operating in compliance with the current building approval(s). Rule Rule: 5101:2-12-04 Fire Inspection Compliant Documenting Statement(s), If applicable Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 3/22/23. Rule Rule: 5101:2-12-04 Food Service Requirements Rule: 5101:2-12-04 Food Service Requirements Documenting Statement(s), If applicable Documenting Statement: The food service license was observed posted. Following in the audit number and date of expiration: MJAECBPQCO, March 1, 2023. Rule Status Documenting Statement: The food service license was observed posted. Following in the audit number and date of expiration: MJAECBPQCO, March 1, 2023. Rule Status Documenting Statement: The food service license was observed posted. Following in the audit number and date of expiration: MJAECBPQCO, March 1, 2023. | Requirements | | |
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| Rule: 5101:2-12-04 Food Service Requirements Compliant Documenting Statement: The food service license was observed posted. Following in the audit number and date of expirations MJAECBPQCO, March 1, 2023. Rule Status Documenting Statement: The food service license was observed posted. Following in the audit number and date of expirations MJAECBPQCO, March 1, 2023. Rule 5101:2-12-07 Administrator Qualifications Documenting Statement: The food service license was observed posted. Following in the audit number and date of expirations MJAECBPQCO, March 1, 2023. | Pula | Status | Documenting Statement(s) If applicable |
| Requirements license was observed posted. Following in the audit number and date of expirations MJAECBPQCO, March 1, 2023. Rule | | | |
| Rule Status Documenting Statement(s), If applicable 5101:2-12-07 Administrator Qualifications | | Compilant | _ |
| Rule Status Documenting Statement(s), If applicable 5101:2-12-07 Administrator Qualifications | Requirements | | • |
| Rule Status Documenting Statement(s), If applicable 5101:2-12-07 Administrator Qualifications | | | · |
| 5101:2-12-07 Administrator Compliant Qualifications | | | Wish Lebi Qee, Waren 1, 2023. |
| 5101:2-12-07 Administrator Compliant Qualifications | | | |
| Qualifications | Rule | Status | Documenting Statement(s), If applicable |
| | 5101:2-12-07 Administrator | Compliant | |
| Rule Status Documenting Statement(s) If applicable | Qualifications | | |
| Rule Status Documenting Statement(s) If applicable | | | |
| Documenting Statement(3), if applicable | Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Compliant | 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | Responsibilities/Requirements | | |
| | | | |
| Rule Status Documenting Statement(s), If applicable | Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member Compliant | 5101:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | Educational Requirements | | |
| | | | |
| Rule Status Documenting Statement(s), If applicable | Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training & Compliant | | Compliant | |
| Whistle Blower Protection | Whistle Blower Protection | | |
| | | | |
| Rule Status Documenting Statement(s), If applicable | Rule | Status | Documenting Statement(s), If applicable |

| Deglinning: | | |
|---|--------------|--|
| Rule: 5101:2-12-09 Background Check Requirements | Compliant | Documenting Statement: During the inspection, the required documentation |
| Requirements | | regarding background checks was on file |
| | | for all employees listed. |
| | | Tot all employees listed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: The program |
| Requirements | | had at least one Child Care Staff Member |
| | | with currently valid training in First Aid, |
| | | Management of Communicable Disease, |
| | | CPR, and Child Abuse Prevention present |
| | | and readily accessible during all hours of |
| | | operation. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Professional | Compliant | Documenting Statement: At the time of |
| Development Requirements | | the inspection, all child care staff |
| | | members had completed the required |
| | | amount of professional development |
| | | training. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| | T. | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years | Compliant | |
| Officer 2 1/2 rears | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | | playground inspections were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 4th quarter. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play | Not Verified | Documenting Statement: The outdoor |
| Equipment | | play space and equipment were not |
| | | viewed during this inspection due to |
| | | muddy conditions; inclement weather |
| | | conditions; however, the requirements |
| | | were discussed. |
| | | |
| | | |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---------------------|--|
| Rule: 5101:2-12-11 Outdoor Play Fall | Not Verified | Documenting Statement: The protective |
| Zones | | surfaces under the outdoor equipment |
| | | were not viewed during this inspection |
| | | due to rain; muddy conditions; however, |
| | | the requirements were discussed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| | ' | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Compliant | Documenting statement(s), if applicable |
| Environment | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | |
| Environment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation and Field | Compliant | bocamenting statement(s), it applicable |
| Trip Procedures | | |
| | , | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: The driver(s) |
| Driver Requirements | | had completed the required ODJFS driver |
| | | training. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | boddinenting statement(s), it applicable |
| 3 = | - F | |
| | I a | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard Precautions | Compliant | |
| - recautions | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| Dula | Chahua | Decrees the Ct-to |
| Rule 5101:2-12-16 Incident/Injury | Status Compliant | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury Reporting | Compilant | |
| neporting | <u> </u> | |

| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-------------|---|
| 5101:2-12-16 Written Disaster Plan | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | Compilation | equipment was observed in all categories. |
| _40.6 | | equipment true exists on in an outsported |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| | | |
| Dula | Chahus | Decomposition Chattan and (a) 15 11 11 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| | | |
| | | |
| 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 | 200amental gotatement (2), ii appination |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement(S), If applicable |
| 5101.2 12 20 Cots and Napping | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were |
| | | labeled with the assigned infant's name. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-22 Meal and Snack | Compliant | Documenting Statement: The menu |
| Requirements | | posted reflected the meal served. |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were |
| Food Preparation | | labeled as required. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: Appropriate |
| Toilet Training | | diaper changing procedures were |
| | | observed during the inspection in the |
| | | infant room(s). |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |