



## Center Licensing Inspection Full Report

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

| Program Details  |                                      |                                   |                   |
|--|--------------------------------------|-----------------------------------|-------------------|
| Program Name<br>EARLY ACHIEVERS ENRICHMENT CENTER            | Program Number<br>000000300624       | Program Type<br>Child Care Center |                   |
| Address<br>25000 Euclid Ave West Annex Euclid<br>OH<br>44117 |                                      | County<br>CUYAHOGA                |                   |
|  |                                      |                                   |                   |
| Building Approval Date                                       | Use Group/Code                       | Occupancy Limit                   | Maximum Under 2 ½ |
| Fire Inspection Approval Date<br>07/14/2023                  | Food Service Risk Level<br>Level III |                                   |                   |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual     | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>03/05/2024 | Begin Time<br>10:45 AM   | End Time<br>3:45 PM              |
| Reviewer:<br>DIANE TRACZYK    |                          |                                  |

| Summary of Findings      |                                      |                       |                        |                    |
|--------------------------|--------------------------------------|-----------------------|------------------------|--------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>14 | No. Serious Risk<br>0 | No. Moderate Risk<br>4 | No. Low Risk<br>12 |

| 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)                                 |                  | 3          | 0         | 3     |
| Young Toddler   |                  | 5          | 0         | 5     |
| <b>Total Under 2 ½ Years</b>                              | 22               | 8          | 0         | 8     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 11         | 0         | 11    |
| School Age  |                  | 0          | 24        | 24    |
| <b>Total Capacity/Enrollment</b>                          | 35               | 11         | 24        | 43    |

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



|              |                          |        |  |
|--------------|--------------------------|--------|--|
| Infants      | 0 to < 12 months         | 3 to 9 | 1st - at arrival combined with toddlers and preschoolers on the playground |
| Infants      | 0 to < 12 months         | 1 to 2 | 2nd  |
| Infants      | 0 to < 12 months         | 1 to 2 | 3rd  |
| Toddlers     | 18 months to < 30 months | 1 to 2 | 2nd - in toddler room  |
| Preschoolers | 18 months to < 30 months | 1 to 5 | 2nd - combined with toddlers for lunch                                     |
| Preschoolers | 18 months to < 30 months | 1 to 7 | 3rd - combined with toddlers for nap                                       |
| School-agers | School-Age to < 11 years | 1 to 9 | 1st - after school   |

### Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

### Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

### Moderate Risk Non-Compliances

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals and machinery in a place that is inaccessible to children. The program is required to provide an outdoor play area away from machinery in operation.



Finding: During the inspection, a potentially hazardous item or toxic substance was used or stored in the toddler room on the shelf by the door where children had access to it, as noted in numbers 2 & 14 below.

1. Bleach.
2. Cleaning agent: sanitizing wipes.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.
6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.
14. Other potentially hazardous substance: hand sanitizer

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/07/2024

**Domain: 05 Health & Safety**

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

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

Finding: During the inspection, it was determined that a meal or snack at the program did not meet the requirements as noted in number 6 below:

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



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

Corrective Action Plan Due: 04/07/2024

**Domain: 08 Staff Files**

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

Code: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number 3 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/07/2024

**Domain: 09 Children's Files**

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

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Finding: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number 40 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 caring for the child when the child the plan was present.



41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/07/2024

### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in numbers 2 & 7 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 04/07/2024



**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

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

Finding: During the inspection, it was determined that handwashing requirements were not followed as listed in number 12 below, as required in rule.

1. At least one staff/child did not wash their hands upon arrival for the day.
2. At least one staff/child did not wash their hands prior to departure.
3. At least one staff did not wash their hands upon entry into a classroom.
4. At least one staff/child did not wash their hands after toileting or assisting a child with toileting.
5. At least one staff/child did not wash their hands after each diaper change or pull-up change.
6. At least one staff did not wash their hands after contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
7. At least one child did not wash their hands after contact with bodily fluids.
8. At least one child did not wash their hands after returning inside after outdoor play.
9. At least one staff did not wash their hands after cleaning or sanitizing or using any chemical products.
10. At least one staff/child did not wash their hands after handling pets, pet cages or other pet objects that have come in contact with the pet.
11. At least one staff did not wash their hands before eating, serving or preparing food or bottles or feeding a child.
12. At least one child did not wash their hands before eating or assisting with food preparation.
13. At least one staff did not wash their hands before and after completing a medical procedure or administering medication.
14. At least one child did not wash their hands after water activities.
15. At least one staff/child did not wash their hands when visibly soiled (must use soap and water).
16. Other [ ].

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

Corrective Action Plan Due: 04/07/2024

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 Emergency Drills

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



Finding: During the inspection, it was determined that the required drills were not completed for item number 1 below:

1. Monthly fire drills for November and December of 2023.
2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 04/07/2024

**Domain: 05 Health & Safety**

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

Code: The program is required to post the current weekly menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Finding: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 4 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire lunch was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

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: 05 Health & Safety**

Rule: 5101:2-12-22 Fluid Milk Requirements

Code: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.





Finding: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in numbers 3 & 5 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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: 5101:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in numbers 2, 3, 4, 5 & 6 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: 04/07/2024

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number 4 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 04/07/2024

**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.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in numbers 1 & 5b 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: 04/07/2024

**Domain: 08 Staff Files**

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

Code: The program administrator is required to be onsite at the program for the required amount of time.

Finding: During the inspection, it was determined that the program did not have at least one administrator onsite for 50 percent of the program's operating hours or 40 hours a week, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/07/2024

**Domain: 08 Staff Files**

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

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 3, 4, 5 & 6 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: 04/07/2024

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

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

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

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in one or more of the numbers 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: 04/07/2024



**Domain: 09 Children's Files**

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

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

Finding: 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 number 14 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.

**Rules In-Compliance/Not Verified**

| Rule                              | Status    | Documenting Statement(s), If applicable                                    |
|-----------------------------------|-----------|--|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: During the inspection, the requirements of the rule |



|  |           | regarding posting the program's license were discussed. We discussed that the current license with the current Administrator must be posted.   |
|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-02 Current Information             | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-03 Inspection Requirements         | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-04 Building Department Inspection  | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 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 7/14/24.  |
| Rule: 5101:2-12-04 Fire Inspection           | Compliant | Documenting Statement: Although the program had documentation of a current fire inspection without any uncorrected violations at the time of the licensing inspection, the program did not have the fire inspection completed within 12 months from the date of the last fire inspection without any uncorrected violations. Please ensure that fire inspections are completed in accordance with the rule requirements. |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Food Service Requirements | Compliant | Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.  |



| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| 5101:2-12-05 Denial, Revocation and Suspension        | Compliant |  |
| 5101:2-12-07 Administrator Qualifications             | Compliant |  |
| 5101:2-12-07 Written Program Policies and Procedures  | Compliant |  |
| 5101:2-12-11 Indoor Space Requirements                | Compliant |  |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years | Compliant |  |
| 5101:2-12-11 Outdoor Space Requirements               | Compliant |  |
| 5101:2-12-11 Outdoor Play Equipment                   | Compliant |  |
| Rule: 5101:2-12-11 Outdoor Play Fall Zones            | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding outdoor play fall zones were discussed. The Little Tikes slide needs to have an adequate fall surface under and around it at all times. |
| 5101:2-12-12 Safe Equipment                           | Compliant |  |
| 5101:2-12-13 Sanitary Equipment and Environment       | Compliant |  |
| 5101:2-12-13 Smoke Free Environment                   | Compliant |  |



| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required. |
| Rule: 5101:2-12-16 First Aid/Standard Precautions              | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required.  |
| Rule: 5101:2-12-16 Management of Communicable Disease          | Compliant |   |
| Rule: 5101:2-12-16 Incident/Injury Reporting                   | Compliant |   |
| Rule: 5101:2-12-17 Daily Schedule                              | Compliant | Documenting Statement: Daily schedules were observed posted.  |
| Rule: 5101:2-12-17 Materials and Equipment                     | Compliant |   |
| Rule: 5101:2-12-17 Daily Outdoor Play                          | Compliant | Documenting Statement: Outdoor play was observed for the infant, toddler and preschool groups.  |
| Rule: 5101:2-12-18 License Capacity                            | Compliant | Documenting Statement: The program was operating within their license capacity limits.  |
| Rule: 5101:2-12-18 Ratio                                       | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance.  |





| Rule  | Status    | Documenting Statement(s), If applicable   |
|---|-----------|---|
| Rule: 5101:2-12-18 Group Size                         | Compliant | Documenting Statement: The group sizes observed on the day of the inspection were in compliance.  |
| Rule: 5101:2-12-18 Group Size                         | Compliant | Documenting Statement: Complete transition agreements were verified in the classrooms for children currently in transition to a new group.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-19 Supervision                        | Compliant | Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group. |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Child Guidance                           | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-20 Cots and Napping                   | Compliant | Documenting Statement: Cots were placed appropriately and safely during nap time.   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-20 Cribs                              | Compliant | Documenting Statement: All cribs were placed 2 feet apart.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Safe Food Handling/Storage               | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-23 Infant Daily Care                        | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: During the inspection, the staff stated that there were no infants on bottles as they were over 1 year old.          |
| Rule  | Status    | Documenting Statement(s), If applicable   |



|   |               |  |
|---|---------------|--|
| 5101:2-12-23 Diapering and Toilet Training                          | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-25 Medication Administration                              | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant     | Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program. |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-16 Written Disaster Plan                                  | Compliant     |  |