

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
NEIGHBORHOOD ALLIANCE CHILD	000000306961		Child Care Center
ENRICHMENT OF LORAIN			
Address			County
3835 CLIFTON AVE LORAIN			LORAIN
OH 44055			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
05/26/2009	E	119	
Fire Inspection Approval Date	Food Service Risk Level		
06/30/2022	Level III		

Inspection Information				
Inspection Type Annual	Inspection So	cope	Inspection Notice	
Inspection Date	Full Begin Time 9	:00 AM	Unannounced End Time 12:02 PM	
08/08/2023 Reviewer:				
Brittani Aloi				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	13	0	2	14

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)		5	0	5
Young Toddler		3	0	3
Total Under 2 ½ Years	41	8	0	8
Older Toddler		2	0	2
Preschool		8	0	8
School Age		26	0	26
Total Capacity/Enrollment	119	36	0	44

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

Preschool	3 years to < 4 years	2 to 6	
Preschool	3 years to < 4 years	2 to 6	
School age	School-Age to < 11 years	1 to 17	
School age	School-Age to < 11 years	1 to 19	
Infants	0 to < 12 months	1 to 4	
Infants	0 to < 12 months	1 to 4	
Toddlers	18 months to < 30 months	1 to 3	
Toddlers	18 months to < 30 months	1 to 3	

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: 00 License & Approvals

Rule: 5101:2-12-04 Fire Inspection

<u>Code</u>: The program is required to have all spaces used for child care inspected by the fire department or the state fire marshal's office prior to serving children. The program is required to obtain a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection. If violations are noted during the inspection, the program is required to have all violations corrected and have the program reinspected to obtain a completed fire form.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for fire inspection as noted in number(s) 1 below:

- 1. The program did not have documentation on file for a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection and the request for the new inspection was not made at least 30 days prior to the expiration of the previous fire inspection.
- 2. The documentation for the most recent fire inspection contained violations that had not been corrected.
- 3. The [] space was being used and had not been approved by the fire department or the state fire marshal's office for child care.

Submit the program's corrective action plan, which includes an updated fire inspection without any uncorrected violations, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/15/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide adequate fall surface for the outdoor play space.

<u>Finding</u>: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in number(s) 3 below:

- 1. No fall surface
- 2. Adequate fall surface to soften the impact of a fall
- 3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone
- 4. Other []

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/07/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: 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.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 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: 09/07/2023

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: 09/07/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment

<u>Code</u>: The program is required to provide equipment that does not pose a safety risk and must follow the manufacturer's guidelines for assembling, installing and using the equipment.

<u>Finding</u>: During the inspection, it was determined that outdoor play equipment was unsafe or not used as intended as noted in number(s) 9 below:

- 1. There was rust exposed.
- 2. There were protruding bolts.
- 3. There were cracks.
- 4. There were holes.
- 5. There was splintering wood.
- 6. There were sharp edges or points.
- 7. There were lead hazards.
- 8. There were toxic substances.
- 9. There were tripping hazards.
- 10. There was chipped and/or peeling paint.
- 11. The sandbox was not covered when the program was closed or during non-daylight hours.
- 12. Outdoor equipment, [] was not developmentally appropriate.
- 13. Outdoor equipment, [], was placed in the main traffic pattern.
- 14. Outdoor play equipment, [], was positioned too closely together, posing a risk of injury if a child were to fall from one piece of equipment into another.
- 15. Outdoor equipment, [], was not securely anchored but did not present a risk of imminent danger of the structure collapsing when children are using the equipment
- 16. Outdoor equipment, [], was 30 inches or more from the ground and did not have a protective barrier that would prevent a child from falling off this piece of equipment.
- 17. The manufacturer's guidelines for assembly and installation were not followed for the [].
- 18. Functionally linked equipment was used by preschool-age children and the distance between two adjacent pieces of equipment exceeded 12 inches.
- 19. Functionally linked equipment was used by school-age children and the distance between two adjacent pieces of equipment exceeded 18 inches.
- 20. Other [].

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

Corrective Action Plan Due: 09/07/2023

Domain: 04 Indoor/Outdoor Space

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

Code: The program is required to have an outdoor play space free from trash and foreign objects.

<u>Finding</u>: During the inspection, it was determined that the outdoor play space was not free of trash or foreign objects as noted in number(s) 8 below:

- 1. The outdoor area was littered with trash.
- 2. The trash can was missing a lid.
- 3. The trash can was not emptied from the day(s) before.
- 4. The trash can was overflowing with trash.
- 5. The trash can was infested with insects.
- 6. The trash can was visibly dirty.
- 7. There was broken glass.
- 8. There were tall weeds.
- 9. There was poison ivy.
- 10. There were tree branches.
- 11. There was mold visible.
- 12. There were thistles with prickers.
- 13. There were bird droppings.
- 14. The sandbox was contaminated.
- 15. Other [].

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

Corrective Action Plan Due: 09/07/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Separation of Children Under 2 1/2 Years

Code: The program is required to separate children younger and older than 2 1/2 years of age.

<u>Finding</u>: During the inspection, it was determined a group that included at least one child less than the age of two and one half years of age was not kept separate from groups of older children as noted in number(s) 1 below:

- 1) The Toddler group, which included children less than two and one half years of age, were cared for in a space where a group of older children were receiving care.
- 2) A barrier was not used to separate the space being used by the group of children less than two and one half years of age from space being used for groups of children two and one half years and older.
- 3) The barrier separating the groups was not at least 36 inches in height.
- 4) The barrier separating the groups was not continuous.

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

Corrective Action Plan Due: 09/07/2023



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.

<u>Finding</u>: During the inspection, it was determined that the required drills were not completed for item number(s) 1, 2, 3 below:

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

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

Corrective Action Plan Due: 09/07/2023

Domain: 05 Health & Safety

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

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

<u>Finding</u>: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number(s) 3 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: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

<u>Code</u>: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

<u>Finding</u>: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in number(s) 7 below:

- 1. Written parental permission was not secured for field trips and/or routine trips off the premises.
- 2. The written permission was missing the child's name.
- 3. The written permission was missing the date(s) of the trip(s) (field trips only).
- 4. The written permission was missing the destination(s) of the trip(s).
- The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
- 6. The written permission was missing the signature of the parent.
- 7. The written permission was missing the date on which the permission was signed.
- 8. The written permission was missing a statement notifying parents how their child will be transported.
- 9. Permission forms for routine trips were not being updated annually.
- 10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
- 11. Other: [].

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

<u>Code</u>: The program is required to have staff trained in CPR, First Aid, and Communicable Diseases on all trips.



<u>Finding</u>: During the inspection, it was determined that a person trained in cardiopulmonary resuscitation (CPR), first aid and management of communicable disease, had not been present for number(s) 1, 2 below as required by the rule:

- 1. In the vehicle for routine trips;
- 2. In the vehicle for field trips;
- 3. At the destination on all field trips.

Secure current training for the area needed or restructure the staff who are currently trained on the vehicle during routine trips and field trips. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/07/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 4 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: 09/21/2023

Domain: 08 Staff Files

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

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

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2, 3, 4 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: 09/19/2023

Domain: 08 Staff Files

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

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

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

- 1. First Aid child care staff members scheduled during the hours of [] and [] had expired training
- 2. First Aid child care staff members scheduled during the hours of [] and [] did not have verification of completion of First Aid
- 3. First Aid trained child care staff member was not present in each building used by the program.

- 4. CPR child care staff members scheduled during the hours of [] and [] had expired training
- 5. CPR child care staff scheduled during the hours of [] and [] had did not have verification of completion of CPR
- 6. CPR trained child care staff member was not present in each building used by children
- 7. CPR training taken by staff was not appropriate for all ages and developmental levels of the children in care
- 8. CPR audiovisual or electronic media training taken by staff did not include an in-person component of the training
- 9. Communicable Disease child care staff members scheduled during the hours of [] and [] had expired training
- 10. Communicable Disease child care staff scheduled during the hours of 6:00AM and 8:00AM and 5:00PM and 6:00PM 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: 09/19/2023

Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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(s) 2 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: 09/07/2023

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.

<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(s) 3, 5, 6, 7 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: 09/07/2023

Rules In-Compliance/Not Verified

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



Destinating:		
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	bocumenting statement(s), it applicable
9 ,	Compliant	
Inspection		
	1 -	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
		the audit number and date of expiration:
		CKNL-CPGNJT, 3/1/24.
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The off-site
Requirements	·	food processing establishment's current
		Ohio Department of Agriculture
		registration information was observed
		_
		during the inspection.
D 1	C	D 11 Ct 1 1/) If 11 11
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-12-07 Administrator		
5101:2-12-07 Administrator		Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
5101:2-12-07 Administrator Qualifications	Compliant	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies
5101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved
5101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies
5101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved
S101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program Policies and Procedures	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.
S101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program Policies and Procedures Rule	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved
S101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program Policies and Procedures Rule S101:2-12-09 Background Check	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.
S101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program Policies and Procedures Rule	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.
Rule Rule: 5101:2-12-07 Written Program Policies and Procedures Rule Sule: 5101:2-12-07 Written Program Policies and Procedures	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department. Documenting Statement(s), If applicable
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S101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-09 Background Check Requirements Rule	Status Compliant Status Compliant Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department. Documenting Statement(s), If applicable Documenting Statement: At the time of the inspection, all child care staff
Rule S101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-09 Background Check Requirements Rule Rule: 5101:2-12-10 Professional	Status Compliant Status Compliant Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department. Documenting Statement(s), If applicable Documenting Statement: At the time of the inspection, all child care staff members had completed the required
Rule S101:2-12-07 Administrator Qualifications Rule Rule: 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-09 Background Check Requirements Rule Rule: 5101:2-12-10 Professional	Status Compliant Status Compliant Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department. Documenting Statement(s), If applicable Documenting Statement: At the time of the inspection, all child care staff
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T = 101 0 10 11 1 1 0		
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
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
Rule: 5101:2-12-13 Handwashing	Compliant	Documenting Statement: Staff and
- I	Compliant	children were observed washing hands as
Requirements		
		required by the rule.
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 - Driver	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation -	Compliant	Documenting Statement: An annual
Vehicle Requirements		safety check of the vehicle(s), using the
venicle requirements		JFS 01230 "Vehicle Inspection Report For
		·
		Child Care Centers" form, was verified
		and dated 5/8/23 (10626).
2.1		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	
Plans		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	,
Sabara aa ab ivicultui, Delitui, ullu	- Compilant	_ I
General Emergency Plan		
General Emergency Plan		

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 First Aid/Standard	Compliant	Documenting Statement: During the
Precautions	Compilant	inspection, the program had complete
Treductions		first aid kits available as required.
		mot and kits available as required.
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: 5101:2-12-16 Written Disaster	Compliant	Documenting Statement: No changes
Plan		have been made to the disaster plan since
		it was last approved by this Department.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	bocumenting statement(3), if applicable
5101.2 12 17 Daily Schedule	Compilant	
	l	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	bocumenting statement(3), if applicable
5101.2-12-18 License Capacity	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
Dolla	Ctatura	December 6: 1/2 if 1: 11
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	(-),
, -	<u>'</u>	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Ctatus	Decumenting Statement(s) If applicable
	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	bocumenting statement(s), if applicable
Handling/Storage	Compilant	
Transamily occurate		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food	Compliant	
Preparation		
Bula	Ctatus	Decumenting Statement(s) If applicable
Rule: 5101:2-12-23 Diapering and	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Appropriate
Toilet Training	Compliant	diaper changing procedures were
Tonet training		observed during the inspection in the
		infant room(s).
	•	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication	Compliant	
Administration		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		