

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 | Program Number | | Program Type | |
| LOOKING GLASS LEARNING CENTER | 000000308505 | | Child Care Center | |
| | | | | |
| Address | 80 | | County | |
| 1393 MOGADORE RD KENT | | | PORTAGE | |
| ОН | | | | |
| 44240 | | | | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 02/03/2012 | E | 88 | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | |
| 11/22/2023 | Level III | | | |

| Inspection Information | | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection So | cope | Inspection Notice | | |
| Annual | Full | | Unannounced | | |
| Inspection Date | Begin Time | | End Time | | |
| 09/19/2024 | 9:50 AM | | 4:45 PM | | |
| Reviewer: | | | | | |
| BETH RAGLE | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 58 | 8 | 0 | 1 | 8 | |

| 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) | | 10 | 0 | 10 | |
| Young Toddler | | 15 | 0 | 15 | |
| Total Under 2 ½ Years | 43 | 25 | 0 | 25 | |
| Older Toddler | | 3 | 0 | 3 | |
| Preschool | | 44 | 0 | 44 | |
| School Age | | 0 | 0 | 0 | |
| Total Capacity/Enrollment | 78 | 47 | 0 | 72 | |

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

| 30 months to < 36 months | 2 to 11 | Outdoor play |
|--------------------------|--|--------------------------|
| 30 months to < 36 months | 2 to 9 | Nap |
| 30 months to < 36 months | 2 to 11 | Lunch |
| 0 to < 12 months | 2 to 7 | Play time; |
| | | diapering |
| 0 to < 12 months | 2 to 7 | Naps; infant |
| | | activities |
| 0 to < 12 months | 2 to 7 | Meals; bottles |
| 12 months to < 18 months | 1 to 4 | Play time |
| 12 months to < 18 months | 1 to 4 | Lunch |
| 12 months to < 18 months | 1 to 4 | Nap |
| 30 months to < 36 months | 2 to 9 | Music; transition |
| 18 months to < 30 months | 1 to 9 | Nap |
| 18 months to < 30 months | 2 to 9 | Lunch |
| 3 years to < 4 years | 1 to 15 | Nap |
| 3 years to < 4 years | 2 to 14 | Centers |
| 3 years to < 4 years | 2 to 15 | Lunch |
| 4 years to < 5 years | 1 to 11 | Lunch |
| 4 years to < 5 years | 1 to 11 | Nap |
| 4 years to < 5 years | 1 to 11 | Outdoor play |
| | 30 months to < 36 months 30 months to < 36 months 0 to < 12 months 0 to < 12 months 12 months to < 18 months 12 months to < 18 months 12 months to < 18 months 13 months to < 36 months 18 months to < 30 months 18 months to < 30 months 18 months to < 30 months 3 years to < 4 years 3 years to < 4 years 4 years to < 5 years 4 years to < 5 years | 30 months to < 36 months |

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: 09 Children's Files | | |



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

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

<u>Finding</u>: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in numbers 18, 19 below:

1. No plan was on file.

(Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.
- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete.

(Page 2)

- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

(Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s)of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

(Page 4)

- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. Medication listed in the procedures to follow was 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: 10/19/2024

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to keep their information current in OCLQS.

<u>Finding</u>: During the inspection, it was determined the information in number 7 below was not up to date in the Ohio Child Licensing and Quality System (OCLQS):

- 1. Mailing address
- 2. Telephone number
- 3. Email address
- 4. Days and hours of operation
- 5. Services offered
- 6. Name of program



7. Private pay rates

Technical assistance was provided, and as discussed, log on to OCLQS and update the information, as required.

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>: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in numbers 16, 22 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers.
- 2. Open pull cords that are not closed loop.
- 3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Employee(s) purse(s).
- 7. Diaper bags.
- 8. Television not securely anchored.
- 9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 10. Smoke detector needing batteries replaced.
- 11. An area rug did not have a nonskid backing.
- 12. An area rug presented a tripping hazard.
- 13. A floor surface that was unsafe.
- 14. No platform was provided for the sink or toilet in the classroom.
- 15. The platform provided for the sink or toilet in the classroom was not sturdy.
- 16. The platform provided for the sink or toilet in the Preschool 2 classroom posed a safety hazard in that it was sliding when stepped upon.
- 17. Telephone cords.
- 18. Staff member stepped over a barrier/gate while holding a child.
- 19. Emergency exits were blocked by the classroom furniture.
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Other: A light fixture covering was not fully secured in Preschool 2.

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: 10/19/2024

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 numbers 6, 20 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 broken pieces on play house.
- 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.
- 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: Riding toys in the courtyard area were missing parts.

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

Corrective Action Plan Due: 10/19/2024



Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Qualifications

Code: The program administrator is required to complete the rules course reivew within the defined time

period.

<u>Finding</u>: During the inspection, it was determined that the second administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in this rule. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

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

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in numbers 1, 2 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: 10/19/2024

Domain: 08 Staff Files

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

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

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

- 1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
- 2. First aid training was not completed within ninety days of hire.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
- 4. The child abuse and neglect recognition and prevention training was expired.
- 5. The first aid training was expired.
- 6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/19/2024

Domain: 08 Staff Files

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

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

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

1. The child care staff member(s) had not completed at least six hours of professional development.

- 2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 3. Training topic did not meet the requirements listed in appendix A of this rule.
- 4. Documentation of training did not meet the requirements of this rule.
- 5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
- 6. Other.

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

Corrective Action Plan Due: 10/19/2024

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Qualifications

<u>Code</u>: The program is required to have an administrator that is promoted within to complete the required course work within one year.

<u>Finding</u>: During the inspection, it was determined that the second administrator, promoted to this position on 2/3/2023, had not completed requirements listed in Appendix A of this rule. Submit additional documentation of educational qualifications as outlined in Appendix A of this rule, or remove this administrator from the license. To name a new administrator, an administrator amendment must be submitted in OCLQS, the licensing system. Submit the program's corrective action plan, which includes documents to support qualifications, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/19/2024

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|---|

| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
|---|---------------------|--|
| Dodo | Chahus | Described Charles and (a) If a malicular |
| Rule 5101:2-12-03 Inspection Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Building Department Inspection | Compliant | Documenting Statement: A copy of the certificate of occupancy was available onsite for review. |
| 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 11/22/2024. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements | Compliant | Documenting Statement: The food service license was observed posted. Following is the date of expiration: 3/1/2025. |
| | | |
| Rule: 5101:2-12-07 Administrator Responsibilities/Requirements | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The administrator's hours of availability to meet with parents were posted in a noticeable location. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program Policies and Procedures | Compliant | Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department. |
| | | |
| Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: On the day of the inspection, all child care staff members had met orientation training requirements. |

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|---|--|--|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the |
| Requirements | | inspection, the required documentation |
| | | regarding background checks was on file |
| | | for all employees listed. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | | |
| | E-warm | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The outdoor |
| Requirements | | play area is separated from traffic and |
| | | other hazards by a fence. |
| B 1 5404 2 42 44 0 11 6 | | |
| 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 |
| | | 6/3/24. |
| | | |
| Rule | Chatus | Decumenting Statement(s) If applicable |
| | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: The protective |
| Zones | | material used under outdoor equipment |
| | | was mulch. |
| 1 | 1 | |
| | | |
| Rule | Status | Documenting Statement(s). If applicable |
| Rule Rule: 5101:2-12-12 Safe Equipment | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: Equipment was |
| Rule Rule: 5101:2-12-12 Safe Equipment | Status Compliant | Documenting Statement: Equipment was |
| | The second secon | |
| | The second secon | Documenting Statement: Equipment was |
| | The second secon | Documenting Statement: Equipment was |
| Rule: 5101:2-12-12 Safe Equipment | Compliant | Documenting Statement: Equipment was observed to be in good condition. |
| Rule: 5101:2-12-12 Safe Equipment Rule | Compliant | Documenting Statement: Equipment was observed to be in good condition. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Safe Equipment Rule Rule Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: Equipment was observed to be in good condition. Documenting Statement(s), If applicable Documenting Statement: During the |
| Rule: 5101:2-12-12 Safe Equipment Rule Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: Equipment was observed to be in good condition. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the equipment was observed |
| Rule: 5101:2-12-12 Safe Equipment Rule Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: Equipment was observed to be in good condition. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the equipment was observed |
| Rule: 5101:2-12-12 Safe Equipment Rule Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: Equipment was observed to be in good condition. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the equipment was observed clean and in good repair. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Safe Equipment Rule Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant Status Compliant | Documenting Statement: Equipment was observed to be in good condition. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the equipment was observed clean and in good repair. Documenting Statement(s), If applicable Documenting Statement: Staff and |
| Rule: 5101:2-12-12 Safe Equipment Rule Rule: 5101:2-12-13 Sanitary Equipment and Environment Rule | Status Compliant Status Status | Documenting Statement: Equipment was observed to be in good condition. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the equipment was observed clean and in good repair. Documenting Statement(s), If applicable |

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|---------------------------------------|-----------|--|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free | Compliant | Documenting Statement: A notice was |
| Environment | | observed posted stating that smoking is |
| | | prohibited at the program. |
| | | Promission and Programm |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | Compilant | the inspection, 25% of the children's |
| Em omnene necords | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| | | were complete) as required by the rule. |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: In review of |
| Enrollment Records | | 25% of the records, at the time of the |
| | | inspection, children's medical statements |
| | | were complete and on file, as required by |
| | | the rule. |
| | | I |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: On the day of |
| and General Emergency Plan | | the inspection, the complete prescribed |
| | | JFS 01242 "Medical, Dental, and General |
| | | Emergency Plan For Child Care" were |
| | | posted in the program as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| | | for completed fire, weather, and |
| | | emergency/lockdown drills was verified |
| | | during this inspection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the |
| Precautions | | inspection, the program had complete |
| | | first aid kits available as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Management of | Compliant | Documenting Statement: The JFS 08087 |
| Communicable Disease | | "Communicable Disease Chart" was |
| | | 1 1 1 1 10 0 11 1 1 10 |
| | | posted and was readily available to staff and parents. |

| Rule: 5101:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement: The program staff stated parents were informed when their child had any exposure to a contagious illness by numbers 1, 4 below: 1. A posted notice; 2. Verbal communication; |
|--|-----------|---|
| | | 3. A written notice sent home;4. A note posted on the classroom door;5. Other. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Incident/Injury Reporting | Compliant | Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required. |
| | | |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement(s), If applicable Documenting Statement: Daily schedules were observed posted. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and Equipment | Compliant | Documenting Statement: Sufficient equipment was observed in all categories. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: Outdoor play was observed for the infant, toddler, preschool groups. |
| Dula | Status | Designmenting Statement (s) If a mulicable |
| Rule: 5101:2-12-18 License Capacity | Compliant | Documenting Statement(s), If applicable Documenting Statement: The program was operating within their license capacity limits. |
| | 1 - | |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement(s), If applicable Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required. |

| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance. |
|-------------------------------------|-----------|--|
| | E | |
| 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. |
| | Control | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance | Compliant | Documenting Statement: Child Care Staff |
| Records | | Members were observed recording the |
| | | attendance for each child upon arrival |
| | | and documenting each child's departure. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff |
| | | Members were supervising the children |
| | | and were able to intervene as needed. |
| | | |
| D-1 | Chal | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Child Guidance | Compliant | Documenting Statement: Appropriate |
| | | child guidance techniques and practices |
| | | were observed being used during the |
| | | inspection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: The rest area |
| | | had adequate lighting, which allowed for |
| | | the visual supervision of children. |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Cots were |
| Nuic. 3101.2 12-20 cots and Napping | Compilant | placed appropriately and safely during |
| | | nap time. |
| | | nap anc. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: Cribs were |
| | | separated from the play space by a safe |
| | | and sturdy and physical barrier. |
| Dula, E101,2 12 20 Cuils | Campliant | Dogumouting Ct-t |
| 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: Posted menus |
| Requirements | 55' | included foods from all four food groups. |
| | | |
| Rule: 5101:2-12-22 Meal and Snack | Compliant | Documenting Statement: Substituted |
| Requirements | | foods served were recorded on the |
| | | posted menu, as required by this rule. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| Dule | Ctatus | Decumenting Statement(s) If applicable |
| Rule 5101:2-12-22 Safe Food | Status Compliant | Documenting Statement(s), If applicable |
| 5000 45 | Compilant | |
| Handling/Storage | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: An appropriate |
| Naic. 5101.2-12-25 illiant bany care | Compliant | program of activities with infants was |
| | | observed. |
| | | observed. |
| | | |
| 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. |
| | | ' |
| | 5 | |
| 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. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-25 Medication | Compliant | Documenting Statement: The program |
| Administration | | had complete written documentation for |
| | | administering medication or food |
| | | supplements. |
| | | |
| Dula | Chatan | Down and the Chat |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Child Care Staff | Compliant | Documenting Statement: All Child Care |
| Member Educational Requirements | | Staff Members had verification of |
| | | educational requirements on file at the |
| | | program. |
| | | |



| Status | Documenting Statement(s), If applicable |
|-----------|---|
| Compliant | Documenting Statement: Annual training of the written disaster plan was completed by staff. |
| | |