

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 | ils | |
|-------------------------------|----------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| CHILD ZONE LLC | 000000400803 | | Child Care Center |
| | | | |
| Address | | | County |
| 2415 DEEWOOD DR COLUMBUS | | | FRANKLIN |
| ОН | | | |
| 43229 | | | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| | | | |
| Fire Inspection Approval Date | Food Service Risk Le | evel | |
| 01/09/2025 | Level III | | |
| | | | |

| | | Insp | ection Information | | |
|-------------------------------|----------------------------------|------------------------|-----------------------|----------------------------------|-------------------|
| Inspection Type Annual | 500 | nspection Sc ull | ope | Inspection Notice Unannounced | |
| Inspection Date 01/09/2025 | | Begin Time L2:00 PM | | End Time 3:30 PM | |
| Inspection Date 01/09/2025 | | Begin Time L2:00 PM | | End Time 3:30 PM | |
| Reviewer: Jada Hightower | ^ | | | - | |
| Reviewer: Lakesha Williams | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified 58 | No. Rules with Non-compliances 7 | | No. Serious Risk O | No. Moderate Risk 0 | No. Low Risk 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) | | 6 | 0 | 6 |
| Young Toddler | | 6 | 0 | 6 |
| Total Under 2 ½ Years | 17 | 12 | 0 | 12 |
| Older Toddler | | 12 | 0 | 12 |
| Preschool | | 22 | 0 | 22 |
| School Age | | 51 | 0 | 51 |
| Total Capacity/Enrollment | 54 | 85 | 0 | 97 |



| Staff-Child Ratios at the Time of Inspection | | | | |
|--|--------------------------|----------------|---------------|--|
| Group | Age Group/Range | Ratio Observed | Comment | |
| Infant | 12 months to < 18 months | 2 to 3 | | |
| Infant | 12 months to < 18 months | 2 to 2 | | |
| Toddler | 18 months to < 30 months | 1 to 5 | | |
| Toddler | 18 months to < 30 months | 1 to 5 | Naptime | |
| Preschool | 3 years to < 4 years | 1 to 9 | Preschool and | |
| | | | School age | |
| | | | combined | |
| Preschool | 3 years to < 4 years | 1 to 9 | Preschool and | |
| | | | school age | |
| | | | combined | |

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 |
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| Moderate Risk Non-Compliances | | |
|---|--|--|
| No Moderate Risk Non-Compliances were observed during this inspection | | |
| The initiation compilations were observed during this inspection | | |
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| | | |
| | | |



Low Risk Non-Compliances

Domain: 03 Postings & Equipment

Rule: 5180:2-12-17 Materials and Equipment

Code: The program is required to have enough equipment for all children in care.

<u>Finding</u>: During the inspection, it was determined that equipment and materials in the following categories were not provided in sufficient quantities for children in the infant classroom, as required: 10.

- 1. Art supplies (excludes infants)
- 2. Manipulative materials and equipment
- 3. Blocks
- 4. Science-nature equipment (excludes infants)
- 5. Language arts and auditory materials and equipment
- 6. Pretend or dramatic play materials
- 7. Music equipment
- 8. Transportation materials and equipment
- 9. Gross motor equipment
- 10. Sensory motor equipment (Infant)
- 11. School age children were not provided sufficient equipment and materials in at least five of the first nine categories above.

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: 5180:2-12-16 First Aid/Standard Precautions

<u>Code</u>: The program is required to have a first aid kit onsite.

<u>Finding</u>: During the inspection, it was determined first aid kit(s) at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in numbers 9 &12 below:



- 1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
- 2. One roll of hypoallergenic first-aid tape.
- 3. Individually wrapped sterile gauze squares in assorted sizes.
- 4. Sterile adhesive bandages in assorted sizes.
- 5. Tweezers.
- 6. Gauze rolled bandage.
- 7. Triangular bandage.
- 8. Rounded end scissors.
- 9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).
- 10. A working digital thermometer.
- 11. Disposable non-latex gloves.
- 12. A working flashlight.
- 13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit.
- 14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.
- 15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
- 16. Soap or waterless sanitizer (field trip or transporting away from the program only).
- 17. Bottled water (field trip or transporting away from the program only).

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: 07 Diapering & Infant Care

Rule: 5180:2-12-23 Infant Bottle and Food Preparation

<u>Code</u>: The program staff is required to label bottles containing formula or breast milk.

<u>Finding</u>: During the inspection, it was determined that bottles containing formula for a particular infant were not labeled with the child's name and date of preparation. 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: 07 Diapering & Infant Care

Rule: 5180:2-12-20 Cribs

Code: The program is required to provide a safe and sufficient barrier to separate the play and sleeping space.

<u>Finding</u>: During the inspection, it was determined that the barrier between the play and sleeping space did not meet the requirements as noted in number 2 below:

- 1. No barrier had been provided
- 2. The barrier did not prevent the infants from entering the sleeping area.
- 3. The barrier was not safe.
- 4. The barrier was not sturdy.
- 5. The barrier impaired staff's ability to see and hear all sleeping infants in their cribs.
- 6. The barrier was inadequate.
- 7. 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: 08 Staff Files

Rule: 5180:2-12-08 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 number 6a 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: 02/08/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Child Medical and Enrollment Records

<u>Code</u>: The program is required to have a completed medical on file at the program for each child enrolled.

<u>Finding</u>: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 2 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. The date of the exam was more than 13 months prior to the date the form was signed.
- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified

nurse practitioner (CNP) who examined the child

- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases

required by division 5104.014 of the Revised Code and found in appendix A to this rule

10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of

conscience, including religious convictions

11. Other []

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

Corrective Action Plan Due: 02/08/2025



Domain: 09 Children's Files

Rule: 5180:2-12-15 Child Medical and Enrollment Records

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

<u>Finding</u>: 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 numbers 4 6,10 &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.

Domain: 10 Written Policies & Procedures

Rule: 5180:2-12-16 Written Disaster Plan

<u>Code</u>: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

<u>Finding</u>: During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 1 below:



- 1. Child care staff members and employees were not trained annually.
- 2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 02/08/2025

Rules In-Compliance/Not Verified

| The state of the s | |
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| Status | Documenting Statement(s), If applicable |
| Compliant | Documenting Statement: The license was |
| , | in a location visible to parents as |
| | required. |
| | 8 - 10/10 T (\$1000000000000000000000000000000000000 |
| Į. | |
| Status | Documenting Statement(s), If applicable |
| Compliant | |
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| Status | Documenting Statement(s), If applicable |
| Compliant | |
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| Status | Documenting Statement(s), If applicable |
| Compliant | |
| | |
| 30 | |
| Status | Documenting Statement(s), If applicable |
| 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 |
| | Status Compliant Status Compliant Status Compliant Status Status Compliant |



| | | violations. Please ensure that fire inspections are completed in accordance with the rule requirements. |
|-------------------------------------|---------------------|---|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 Food Service | Compliant | Documenting Statement: The food service |
| Requirements | | license was observed posted. Following is |
| | | the audit number and date of expiration: |
| | | PR0033416-PT0031148 and Exp: |
| | | 3/1/2025. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Administrator | Compliant | |
| Qualifications | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Administrator | Compliant | booking statement(a), it applicable |
| Responsibilities/Requirements | 30mpnanti | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Written Program | Compliant | |
| Policies and Procedures | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-08 Child Care Staff | Compliant | Documenting Statement: All Child Care |
| Member Educational Requirements | Compliant | Staff Members had verification of |
| Wiember Eddedtonar Requirements | | educational requirements on file at the |
| | | program. |
| | | The L Constitution |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-08 Orientation Training & | Compliant | bocumenting statement(s), it applicable |
| Whistle Blower Protection | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-09 Background Check | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-10 Health Training | Compliant | |
| Requirements | | |
| Dulo | Chatus | Decumenting Statement (1) If any live 1 |
| Rule 5180:2-12-10 Professional | Status Compliant | Documenting Statement(s), If applicable |
| Development Requirements | Compliant | |
| Development nequirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
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|--|--|--|
| 5180:2-12-11 Indoor Space | Compliant | |
| Requirements | and the state of t | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Separation of Children | Compliant | |
| STATE OF THE PROPERTY OF THE P | Compilation | |
| Under 2 1/2 Years | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Space | | 8 |
| · · · · · · · · · · · · · · · · · | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | became ming statement (5), it approase |
| 5180:2-12-12 Safe Equipment | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | 9 | |
| Rule: 5180:2-12-11 Outdoor Play | Compliant | Documenting Statement: The outdoor |
| Equipment | | play space and equipment were not |
| | | viewed during this inspection due to snow |
| | | |
| | | covering; however, the requirements |
| | | were discussed. |
| | | |
| - | <u>.</u> | 1 |
| D. J. | | 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Play Fall Zones | Compliant | Documenting Statement(s), if applicable |
| | | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Play Fall Zones | Compliant | |
| 5180:2-12-11 Outdoor Play Fall Zones Rule | Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Play Fall Zones | Compliant | |
| 5180:2-12-11 Outdoor Play Fall Zones Rule | Compliant | |
| 5180:2-12-11 Outdoor Play Fall Zones Rule | Compliant | |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment | Compliant Status Compliant | Documenting Statement(s), If applicable |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment Rule | Status Compliant Status Status | |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment | Compliant Status Compliant | Documenting Statement(s), If applicable |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment Rule | Status Compliant Status Status | Documenting Statement(s), If applicable |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and | Status Compliant Status Status | Documenting Statement(s), If applicable |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment | Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule | Status Compliant Status Compliant Status Compliant Status | Documenting Statement(s), If applicable |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment | Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing | Status Compliant Status Compliant Status Compliant Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| S180:2-12-11 Outdoor Play Fall Zones Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule Rule | Status Compliant Status Compliant Status Compliant Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements | Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing | Status Compliant Status Compliant Status Compliant Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule S180:2-12-13 Handwashing Requirements | Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement: A notice was |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule S180:2-12-13 Handwashing Requirements | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement: A notice was |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule S180:2-12-13 Handwashing Requirements | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule S180:2-12-13 Handwashing Requirements | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule: 5180:2-12-13 Smoke Free Environment | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule S180:2-12-13 Handwashing Requirements | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. Documenting Statement(s), If applicable |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule: 5180:2-12-13 Smoke Free Environment | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. |
| Rule 5180:2-12-12 Safe Environment Rule 5180:2-12-13 Sanitary Equipment and Environment Rule 5180:2-12-13 Handwashing Requirements Rule Rule Rule: 5180:2-12-13 Smoke Free Environment | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant Status Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. Documenting Statement(s), If applicable |



| | | currently enrolled who had health conditions. |
|---|---------------------|---|
| Rule | Chatus | Decrementing Statement (a) If a mulicable |
| 5180:2-12-16 Medical, Dental, and General Emergency Plan | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-16 Emergency Drills | Compliant | bocamenting statement(s), it applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-16 Management of Communicable Disease | Compliant | |
| Pode | Chatria | Description (testamonal) If a multiple |
| Rule 5180:2-12-16 Incident/Injury Reporting | Status Compliant | Documenting Statement(s), If applicable |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-17 Daily Schedule | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Attendance Records | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-18 Group Size | Compliant | Documenting Statement: The group sizes observed on the day of the inspection were in compliance. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 License Capacity | Compliant | Documenting Statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Ratio | Compliant | Documenting Statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-20 Cots and Napping | Compliant | Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children. |



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| D. J. | Chahua | D |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-19 Supervision | Compliant | |
| | <u>k</u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-19 Child Guidance | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-21 Evening and Overnight Care | Compliant | |
| Date | Chatana | Decree of the Chateron of the Line of the |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Meal and Snack | Compliant | |
| Requirements | 24 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-23 Infant Daily Care | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-23 Diapering and Toilet | Compliant | |
| Training | | |
| _ · | I so | |
| Rule | Status | Documenting Statement(s), If applicable |
| | Compliant | |
| 5180:2-12-25 Medication Administration | Compliant | |