

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 |
| Hope Nursery School and Child Care Center | 000000501109 | | Child Care Center |
| | | | |
| Address | | | County |
| 10610 WATERVILLE ST WHITEHOUSE | | | LUCAS |
| OH 43571 | | | |
| | | * | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| | | | |
| Fire Inspection Approval Date | Food Service Risk Level | | |
| 03/03/2023 | Level III | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date | Begin Time 9 |):15 AM | End Time 1:12 PM | |
| 10/26/2023 | | | | |
| Reviewer: | | | | |
| REBECCA COY | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 4 | 0 | 1 | 3 |

| 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) | | 0 | 0 | 0 |
| Young Toddler | | 4 | 0 | 4 |
| Total Under 2 ½ Years | 15 | 4 | 0 | 4 |
| Older Toddler | | 11 | 0 | 11 |
| Preschool | | 56 | 0 | 56 |
| School Age | | 10 | 17 | 27 |
| Total Capacity/Enrollment | 150 | 77 | 17 | 98 |

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

| Toddler - Tigers | 30 months to < 36 months | 2 to 10 | |
|------------------------------|---------------------------|---------|--|
| Toddler - Tigers | 30 months to < 36 months | 2 to 11 | |
| Toddler - Pandas | 18 months to < 30 months | 1 to 4 | |
| Toddler - Pandas | 18 months to < 30 months | 1 to 4 | |
| Preschool - Penguins | 3 years to < 4 years | 1 to 10 | |
| Preschool - Elephants | 3 years to < 4 years | 1 to 10 | |
| Pre K - Hippos | 4 years to < 5 years | 1 to 10 | |
| Pre K - Hippos | 4 years to < 5 years | 1 to 12 | |
| Pre K - Whales | 4 years to < 5 years | 1 to 7 | |
| Pre K - Whales | 4 years to < 5 years | 1 to 8 | |
| School Age - B/A Kinders | 5 years to < Kindergarten | 1 to 9 | |
| School Age - B/A Kinders | 5 years to < Kindergarten | 1 to 4 | |
| School Age - All Day Kinders | 5 years to < Kindergarten | 1 to 10 | |
| School Age - All Day Kinders | 5 years to < Kindergarten | 1 to 10 | |
| Preschool - Elephants | 3 years to < 4 years | 1 to 9 | |
| Preschool - Penguins | 3 years to < 4 years | 1 to 10 | |

Summary of Non-Compliances

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

| Serious Risk Non-Compliances | | |
|--|--|--|
| 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 number(s) 13 & 30 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.

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- 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: 11/25/2023

Low Risk Non-Compliances

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 number(s) 3, 5b & 5c 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: 11/25/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1 below:

- 1. Verification of completion of a high school education was not on file.
- 2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
- 3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
- 4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/25/2023

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(s) 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: 11/25/2023

Rules In-Compliance/Not Verified

| Rule: 5101:2-12-02 License Posted | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The license was in a location visible to parents as required. |
|---|---------------------|---|
| Rule Rule: 5101:2-12-02 Current Information | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS). |
| Rule | Status | Documenting Statement(s), If applicable |



| 5101:2-12-03 Inspection Requirements | Compliant | |
|---|---------------------|--|
| Rule 5101:2-12-04 Building Department Inspection | Status Compliant | Documenting Statement(s), If applicable |
| | | |
| 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 3/3/24. |
| | | |
| 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 audit number and date of expiration: audit number: JTUK-CPAS4G expiration date: 3-1-24 |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Administrator Qualifications | Compliant | Documenting Statement: The administrator has completed the rules review course. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The administrator's hours of availability to meet with parents were posted in a noticeable location. |
| Rule: 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The administrator's posted hours of availability reflected an appropriate schedule meeting rule compliance. |
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| Rule Pulo: 5101:2 12 07 Writton Program | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program Policies and Procedures | Compliant | Documenting Statement: The written policies and procedures reviewed on the day of the inspection were verified as complete. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |

| Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant | Documenting Statement: On the day of the inspection, all child care staff members had met orientation training requirements. |
|---|---------------------|---|
| Rule Rule: 5101:2-12-09 Background Check Requirements | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Health Training Requirements | Compliant | Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space Requirements | Compliant | bocumenting statement(s), it applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years | Compliant | became range statement (e), in applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence. |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 10/2/23. |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: Shade is provided by means of trees & an awning. |
| | | |
| Rule: 5101:2-12-11 Outdoor Play | Status | Documenting Statement(s), If applicable Documenting Statement: Outdoor |
| Equipment | Compliant | equipment was viewed to be safe and |

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| | | free of rust, sharp points, and other hazards. |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement: All equipment in the outdoor play space was observed to be anchored and stable. |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement: All equipment was observed to be properly placed out of the path of the main traffic pattern. |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement: The playground safety kit was used to verify the outdoor play equipment was free from entrapment hazards and unsafe and protruding bolts. |
| 2 | 1 - | |
| Rule: 5101:2-12-11 Outdoor Play Fall Zones | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The protective material used under outdoor equipment was mulch. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Safe Equipment | Compliant | Documenting Statement: Equipment was observed to be in good condition. |
| Dula | Ctatus | Decimenting Statement(s) If applicable |
| Rule: 5101:2-12-12 Safe Environment | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: Cleaning supplies were viewed stored out of the reach of children. |
| Rule: 5101:2-12-12 Safe Environment | Compliant | Documenting Statement: All electrical outlets were covered with safety receptacles. |
| | C | D |
| Rule: 5101:2-12-13 Sanitary | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: During the |
| Equipment and Environment | Compliant | inspection, it was discussed that blankets were washed daily. |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: On the day of the inspection, the program provided a clean environment in accordance with Appendix A of this rule, which included the furniture, materials and equipment. |



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| Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: During the |
| Equipment and Environment | | inspection, the cleaning and sanitation of items and toys mouthed by children were discussed. |
| | | discussed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Handwashing | Compliant | Documenting Statement: Staff and |
| Requirements | | children were observed washing hands as |
| | | required by the rule. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free | Compliant | Documenting Statement: No smoking was |
| Environment | | allowed on the premises, and the notice |
| | | stating that smoking is prohibited was |
| | | observed posted in a conspicuous place. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation and | Compliant | Documenting Statement: The driver(s) |
| Field Trip Procedures | | had current and valid training in first aid, |
| | | management of communicable disease, |
| | | and CPR. |
| Rule: 5101:2-12-14 Transportation and | Compliant | Documenting Statement: The form(s) |
| Field Trip Procedures | Schland Colonia (Colonia de Colonia de Colon | used by the program for routine and/or |
| | | field trips were verified to meet the |
| | | requirements of the rule. |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: The driver(s) |
| Driver Requirements | | had completed the required ODJFS driver |
| | | training. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: An annual |
| Vehicle Requirements | | safety check of the vehicle(s), using the |
| | | JFS 01230 "Vehicle Inspection Report For |
| | | Child Care Centers" form, was verified |
| | | and dated 10/5/23 and 5/1/23. |
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: During the |
| Vehicle Requirements | , | inspection, weekly safety inspections |
| · · | | and/or monthly emergency exiting drills |



| | | were completed and documented, as required using the ODJFS sample form. |
|--|--|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | | the inspection, 25% of the children's |
| | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: In review of |
| Enrollment Records | The state of the s | 25% of the records, at the time of the |
| On the photostal series of the product of the photostal o | | inspection, children's medical statements |
| | | were complete and on file, as required by |
| | | the rule. |
| | | |
| 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 |
| Rule: 5101.2 12 10 Emergency Drins | Compilant | 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 |
| | | posted and was readily available to staff and parents. |
| | | 2.10 par 2.10. |
| Rule: 5101:2-12-16 Management of | Compliant | Documenting Statement: The program |
| Communicable Disease | | staff stated parents were informed when |
| | | their child had any exposure to a |
| | | contagious illness by number(s) 1 below: |
| | | v v v |



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| | | 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 | Compliant | Documenting Statement: The JFS 01299 |
| Reporting | | "Incident/Injury Report For Child Care" |
| | | forms reviewed during this inspection |
| | | were complete as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: Annual training |
| Plan | | of the written disaster plan was |
| Without ME 1912 | | completed by staff. |
| | | 55p.5558 57 588111 |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: The program's |
| Plan | 3 (0.0) - 1 (0.0) (0.0) - Backing shelp dark " | written disaster plan was reviewed during |
| | | the inspection and met the requirements. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| | | were observed posted. |
| | l l | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | | equipment was observed in all categories. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | 3 (7) |
| , , | | |
| D.I. | | Documenting Statement(s), If applicable |
| | C+-+ | |
| Rule Pulo: 5101:2 12 19 License Canacity | Status | - 1 |
| Rule: 5101:2-12-18 License Capacity | Status Compliant | Documenting Statement: The program |
| | | Documenting Statement: The program was operating within their license |
| | | Documenting Statement: The program |
| | | Documenting Statement: The program was operating within their license |
| | | Documenting Statement: The program was operating within their license |
| Rule: 5101:2-12-18 License Capacity | Compliant | Documenting Statement: The program was operating within their license capacity limits. Documenting Statement(s), If applicable Documenting Statement: The Appendix A |
| Rule: 5101:2-12-18 License Capacity Rule | Compliant | Documenting Statement: The program was operating within their license capacity limits. Documenting Statement(s), If applicable |

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| | | 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. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Group Size | Compliant | Documenting Statement: The group sizes observed on the day of the inspection were in compliance. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance Records | Compliant | Documenting Statement: Child Care Staff Members were observed recording the attendance for each child upon arrival and documenting each child's departure. |
| Rule: 5101:2-12-18 Attendance Records | Compliant | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group. |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed. |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: During the inspection, child care staff were observed assisting children throughout the day. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Child Guidance | Compliant | Documenting Statement(s), it applicable Documenting Statement: Appropriate |
| The state is a state of the sta | Compilation | 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: Cots were placed appropriately and safely during nap time. |
| 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 | Status | Decumenting Statement(s) If applicable |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement(s), If applicable Documenting Statement: The program served the following: breakfast, lunch. pm snack |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Meals served at the program included foods from the four food groups in sufficient amounts. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Posted menus were current and dated. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Posted menus included foods from all four food groups. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Meals were provided at intervals as required by this rule. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Snacks were provided at intervals as required by this rule. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Snacks served at the program included foods from two of the four food groups and provided nutritional value in addition to calories. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: The menu posted reflected the meal served. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: The menu was posted in the entryway. |



| Rule | Status | Documenting Statement(s), If applicable | | | |
|--------------------------------------|-----------|--|--|--|--|
| 5101:2-12-22 Fluid Milk Requirements | Compliant | | | | |
| | | | | | |
| Rule | Status | Documenting Statement(s), If applicable | | | |
| Rule: 5101:2-12-22 Safe Food | Compliant | Documenting Statement: Food was stored | | | |
| Handling/Storage | | in a safe and sanitary manner. | | | |
| | | | | | |
| 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 | | | |
| | | toddler room(s). | | | |
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: Children who | | | |
| Toilet Training | | were toilet training used small toilets in | | | |
| | | the restroom with teacher assistance. | | | |
| | | | | | |
| Rule | Status | Documenting Statement(s), If applicable | | | |
| Rule: 5101:2-12-25 Medication | Compliant | Documenting Statement: Medication was | | | |
| Administration | | stored in a lock box in the office. | | | |
| <u> </u> | | | | | |