

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 | |
| TOLEDO DAY NURSERY @ MERCY CAMPUS | 000000502531 | | Child Care Center | |
| | | | | |
| Address | | | County | |
| 2211 JEFFERSON AVE TOLEDO | | | LUCAS | |
| ОН | | | | |
| 43604 | | | | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 08/26/1998 | I-2 | 86 | | |
| Fire Inspection Approval Date | Food Service Risk Le | evel | | |
| 06/17/2019 | Level III | | | |

| | Inspection Information | | | | |
|---------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection S | cope | Inspection Notice | | |
| Annual | Full | | Unannounced | | |
| Inspection Date | Begin Time | | End Time | | |
| 08/15/2025 | 9:00 AM | | 11:32 AM | | |
| Reviewer: | | | | | |
| SARA DIERKSHEID | SARA DIERKSHEIDE | | | | |
| Summary of Findings | | | | | |
| | | | T | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 58 | 1 | 0 | 0 | 1 | |

| License Capacity and Enrollment at the Time of Inspection | | | | |
|---|------------------|-----------|-----------|---------|
| Age Group | License Capacity | | Enr | ollment |
| | Totals | Full Time | Part Time | Total |
| Infant (Birth to < 18 m) | | 10 | 0 | 10 |
| Young Toddler | | 5 | 0 | 5 |
| Total Under 2 ½ Years | 36 | 15 | 0 | 15 |
| Older Toddler | | 2 | 0 | 2 |
| Preschool | | 16 | 0 | 16 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 54 | 18 | 0 | 33 |

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



| Infants | 0 to < 12 months | 2 to 3 | nap room |
|-----------|--------------------------|--------|-----------|
| Infants | 0 to < 12 months | 2 to 6 | classroom |
| Toddlers | 18 months to < 30 months | 3 to 9 | |
| Preschool | 4 years to < 5 years | 3 to 9 | |

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 5180:2-12-03 and 5180:2-13-03 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 |
| No Moderate Risk Non-Compliances were observed during this inspection |
| |
| |
| |
| |
| Low Risk Non-Compliances |



Domain: 08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements

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

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 5, 6 below:

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

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

Corrective Action Plan Due: 09/14/2025

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|---|
| Rule: 5180:2-12-16 Written Disaster Plan | Compliant | Documenting Statement: Annual training of the written disaster plan was completed by staff. |
| Rule: 5180:2-12-16 Written Disaster Plan | Compliant | Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements. |

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



| Rule: 5180:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
|------------------------------------|-----------|--|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 Building | Compliant | Documenting Statement: A copy of the |
| Department Inspection | | certificate of occupancy was available on- |
| | | site for review. |
| Rule: 5180:2-12-04 Building | Compliant | Documenting Statement: On the day of |
| Department Inspection | 3 | the inspection, the program was |
| | | operating in compliance with the current |
| | | building approval(s). |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-02 Current Information | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 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 3/28/26. |
| | | |
| 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: |
| | | LARN-DEERAW, 3/1/26 |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-07 Administrator | Compliant | Documenting Statement: The |
| Qualifications | | administrator has completed the rules |
| | | review course. |
| | | <u> </u> |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-07 Administrator | Compliant | Documenting Statement: The |
| Responsibilities/Requirements | | administrator's hours of availability to |



| | 10). | |
|--|-----------|--|
| | | meet with parents were posted in a noticeable location. |
| Rule: 5180:2-12-07 Administrator | Compliant | Documenting Statement: The |
| The public service and under the service of the ser | Compliant | administrator's posted hours of |
| Responsibilities/Requirements | | 100 to 10 |
| | | availability reflected an appropriate |
| | | schedule meeting rule compliance. |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |
| Rule: 5180:2-12-07 Written Program | Compliant | Documenting Statement: The written |
| Policies and Procedures | | policies and procedures reviewed on the |
| | | day of the inspection were verified as |
| | | complete. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees |
| | | had current medical statements on file. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-08 Child Care Staff | Compliant | Documenting Statement: All Child Care |
| Member Educational Requirements | | Staff Members had verification of |
| | | educational requirements on file at the |
| | | program. |
| | | programi |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-08 Orientation | Compliant | Documenting Statement: On the day of |
| | Compliant | |
| Training & Whistle Blower Protection | | the inspection, all child care staff |
| | | members had met orientation training |
| | | requirements. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-09 Background Check | Compliant | Documenting Statement: During the |
| Requirements | | inspection, the required documentation |
| | | regarding background checks was on file |
| | | for all employees listed. |
| | | p st |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-10 Professional | Compliant | Documenting Statement: At the time of |
| Development Requirements | | the inspection, all child care staff |
| | | members had completed the required |
| | | amount of professional development |
| | | 10 100 |
| | | training. |
| | | |



| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5180:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-11 Outdoor Space | Compliant | Documenting Statement: The outdoor |
| Requirements | | play area is separated from traffic and |
| | | other hazards by a fence. |
| | 10 ¥25 | |
| Rule: 5180:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | | playground inspections were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 7/3/25. |
| | | |
| P. J. | Ct-t | Danisanting Chater of A. If an Paul I |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-12 Safe Equipment | Compliant | Documenting Statement: Equipment was |
| | | observed to be in good condition. |
| Rule: 5180:2-12-12 Safe Equipment | Compliant | Documenting Statement: The program |
| Nuie. 5180.2-12-12 Sale Equipment | Compliant | used mats under the indoor climbing |
| | | equipment. |
| | | equipment |
| | I | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-11 Outdoor Play | Compliant | Documenting Statement: Outdoor |
| Equipment | | equipment was viewed to be safe and |
| W. S. | | free of rust, sharp points, and other |
| | | hazards. |
| | | |
| | • | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: The protective |
| Zones | | material used under outdoor equipment |
| | | was poured rubber. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: Cleaning |
| | | supplies were viewed stored out of the |
| | | reach of children. |
| | | |



| ~~ | | |
|---|---|---|
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: All electrical outlets were covered with safety receptacles. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: All area rugs had nonskid backing. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being. |
| | Lacore | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: During the inspection, the equipment was observed clean and in good repair. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-13 Handwashing Requirements | Compliant | Documenting Statement: Staff and children were observed washing hands as required by the rule. |
| D. I. | Chat | December 5to to the control of the control of |
| Rule: 5180:2-12-13 Smoke Free | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: No smoking was |
| Environment | Compilant | allowed on the premises, and the notice |
| Environment | | stating that smoking is prohibited was |
| | | observed posted in a conspicuous place. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-15 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: 5180:2-12-15 Child Medical and | Compliant | Documenting Statement: In review of |
| Enrollment Records | ■ Particulary and the control of th | 25% of the records, at the time of the |
| | | inspection, children's medical statements |
| | | were complete and on file, as required by |
| | | the rule. |
| | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | | had current information on the medical |



| | | status and the required treatment plan for the children with health conditions. |
|---|---------------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required. |
| Rule | Chahua | Decrease in a Chatage and a life and inchin |
| Rule: 5180:2-12-16 Emergency Drills | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-16 First Aid/Standard Precautions | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required. |
| Rule: 5180:2-12-16 First Aid/Standard Precautions | Compliant | Documenting Statement: The program had a system in place for regularly checking and replacing first aid kit supplies. |
| | | |
| Rule: 5180:2-12-16 Management of Communicable Disease | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents. |
| Rule: 5180:2-12-16 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 number(s) 1, 5 below: 1. A posted notice; 2. Verbal communication; 3. A written notice sent home; 4. A note posted on the classroom door; 5. Other: Procare |



| Rule | Status | Documenting Statement(s), If applicable | | | |
|--|--|---|--|--|--|
| Rule: 5180:2-12-16 Incident/Injury | Compliant | Documenting Statement: The | | | |
| Reporting | | requirements for completing JFS 01299 | | | |
| | | "Incident/Injury Report For Child Care" | | | |
| | | reports were discussed during the | | | |
| | | inspection. | | | |
| | | | | | |
| | | | | | |
| Rule | Status | Documenting Statement(s), If applicable | | | |
| Rule: 5180:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient | | | |
| Equipment | | equipment was observed in all categories. | | | |
| | | | | | |
| Rule | Status | Documenting Statement(s), If applicable | | | |
| Rule: 5180:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules | | | |
| | | were observed posted. | | | |
| Rule: 5180:2-12-17 Daily Schedule | Compliant | Documenting Statement: During the | | | |
| The second contraction of the second contract | Commence of the first of the state of the st | inspection, developmentally-appropriate | | | |
| | | practices were observed in the | | | |
| | | classroom(s). | | | |
| | | , , , , , , , , , , , , , , , , , , , | | | |
| | G | 12 | | | |
| Rule | Status | Documenting Statement(s), If applicable | | | |
| Rule: 5180:2-12-18 Attendance | Compliant | Documenting Statement: During the | | | |
| Records | | 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: 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 | | | |
| Rule: 5180:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: During the | | | |
| | | inspection, the requirements of the rule | | | |
| | | regarding daily outdoor play were | | | |
| | | discussed. | | | |
| | | 1 | | | |
| Rule | Status | Documenting Statement(s), If applicable | | | |
| | | | | | |



| Rule: 5180:2-12-18 License Capacity | Compliant | Documenting Statement: The program was operating within their license capacity limits. |
|-------------------------------------|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child ratios observed during the inspection surpassed those required by the rule. |
| Rule: 5180:2-12-18 Ratio | Compliant | 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: 5180:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-20 Cots and Napping | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding sleeping and napping were discussed. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-19 Supervision | Compliant | Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group. |
| Rule: 5180:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-19 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: 5180:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were placed 2 feet apart. |



| D 1 5400 0 40 00 0 II | | D |
|--|--|--|
| Rule: 5180:2-12-20 Cribs | Compliant | Documenting Statement: Cribs were |
| | | separated from the play space by a safe |
| | | and sturdy and physical barrier. |
| | | |
| Rule: 5180:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were |
| Selections and Control (Control Control Contro | | labeled with the assigned infant's name. |
| | | labeled with the assigned infants hame. |
| | ļ. | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-22 Meal and Snack | Compliant | Documenting Statement: Meals were |
| 2999059054 \$6900990000 \$005090605540 \$600000 \$6000 \$6000 \$600000 \$6000000 \$600000000 | Compilant | |
| Requirements | | provided at intervals as required by this |
| | | rule. |
| | | |
| Rule: 5180:2-12-22 Meal and Snack | Compliant | Documenting Statement: The menu was |
| Requirements | · | posted in the entryway. |
| (Selectional artifacts (Selectional vide (Selection Social) | | Procedure address contact contacted SuitAddress Processing Process |
| | 1 | , |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-22 Safe Food | Compliant | Documenting Statement: Food was stored |
| APPERENCE SANDA AND SANDA SAND | Compilant | 1 |
| Handling/Storage | | in a safe and sanitary manner. |
| | | |
| Rule | Chatura | Decree outing Statement (a) If a police bla |
| No. No. 100 | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Fluid Milk Requirements | Compliant | |
| | 1 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-23 Infant Daily Care | Compliant | Documenting Statement: An appropriate |
| | | program of activities with infants was |
| | | observed. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were |
| \$1000 MINERAL RECORD (\$1000 MINERAL), \$100 MINERAL RECORD (\$1000 MINERAL RECORD (\$1000 MINERAL RECORD) | Compilant | |
| Food Preparation | | labeled as required. |
| D 5400 2 42 22 6 D H | 6 11 1 | |
| Rule: 5180:2-12-23 Infant Bottle and | Compliant | Documenting Statement: Infants were fed |
| Food Preparation | | in conformity with parent/guardian's |
| | | written, dated instructions. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-23 Diapering and | Compliant | Documenting Statement: Appropriate |
| Toilet Training | Transfer and the second and the seco | diaper changing procedures were |
| Tonet Huming | | |
| | | observed during the inspection in the |
| | | infant room(s). |
| | 1 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |



| II I " | Rule: 5180:2-12-25 Medication Administration | Compliant | Documenting Statement: The program had complete written documentation for administering medication or food supplements. |
|--------|---|-----------|---|
| | | | |