



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 Right At School at Gearity Elementary	Program Number 2170015406	Program Type Child Care Center	
Address 2323 Wrenford Road University Heights OH 44118		County CUYAHOGA	
Building Approval Date 08/21/2019	Use Group/Code School Building	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 07/20/2022	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 12/20/2022	Begin Time 3:00 PM	End Time 6:00 PM
Reviewer: Kathryn Noftz		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 20	No. Serious Risk 0	No. Moderate Risk 4	No. Low Risk 23

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		0	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		0	0	0
Preschool		0	11	11
School Age		0	40	40
Total Capacity/Enrollment	206	0	51	51

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



Gearity PM	School-Age to < 11 years	1 to 4	
Gearity PM	3 years to < 4 years	1 to 13	
Gearity PM	3 years to < 4 years	1 to 16	
Gearity PM	3 years to < 4 years	2 to 5	

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: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio
Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Finding: During the inspection, required staff/child ratios were not maintained for the same group on multiple occasions, as noted below:

The ratio determined for the Gearity PM group was 1 Child Care Staff Member(s) for 13 children. Additionally, a ratio of 1 Child Care Staff Member(s) for 16 children was determined for the Gearity PM group.

Additional staff members must be hired or current Child Care Staff Members must be rescheduled to maintain compliance. 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: 01/21/2023



Domain: 01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

Finding: During the inspection, it was determined that children were left unattended while inside the program as noted in number(s) 3 below:

1. Child(ren) were left unattended once.
2. Child(ren) were left unattended more than once.
3. Child(ren) left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other [].

Children must be supervised and within sight and hearing of a child care staff member at all times. 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: 01/21/2023

Domain: 09 Children's Files

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

Code: 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. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 8,16,18,19 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.



5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. 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.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

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: 01/21/2023

Domain: 09 Children's Files

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

Code: 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. The program staff that are trained to perform the procedures listed on the JFS 01236 are to be the only staff permitted to perform the procedures.

Finding: During the inspection, it was determined a child with a condition that required a JFS 01236 "Child Medical/Physical Care Plan" had been present and the program did not meet the requirement(s) noted in number(s) 1 below:



1. 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.
2. 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.
3. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
4. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
5. Other: [].

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: 01/21/2023

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-04 Building Department Inspection

Code: The program is required to maintain a copy of the certificate of occupancy on file at the center for review.

Finding: During the inspection, it was determined the program did not have a copy of the certificate of occupancy available on-site for review. Submit the program's corrective action plan, which includes a copy of the certificate of occupancy, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023

Domain: 00 License & Approvals

Rule: 5101:2-12-04 Food Service Requirements

Code: The program is required to obtain written permission from the food service license holder if operating under the food service license of another entity at the same location.



Finding: During the inspection, it was determined the program was operating under a food service license held by another entity at the same location and did not have written documentation granting permission from that entity. Submit the program's corrective action plan, which includes a copy of the written documentation granting permission, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all children wash their hands as outlined in rule.

Finding: During the inspection, it was determined that at least one child in the Gearity PM group did not wash his or her hands at the time listed in number(s) 1 below, as required in rule.

1. Upon arrival.
2. Prior to departure.
3. After toileting/diaper change.
4. After contact with bodily fluids.
5. After returning from outdoor play.
6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.
7. Before eating or assisting with food preparation.
8. After water activities.
9. When visibly soiled (must use soap and water)
10. Other [].

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

Corrective Action Plan Due: 01/21/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number(s) 3 below:



1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for [].
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 01/21/2023

Domain: 04 Indoor/Outdoor Space

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

Code: The program is required to conduct and document quarterly inspections of their outdoor play space.

Finding: During the inspection, it was determined that quarterly inspections of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to retain completed JFS 01299 "Incident/Injury Report For Child Care" on file for at least one year.

Finding: In review of the program's records, it was determined that completed JFS 01299 "Incident/Injury Report For Child Care" forms were not being kept on file at the program for at least one year, as required. Submit the program's corrective action plan, which includes a statement that all JFS 01299 forms will be maintained on file at the program for a minimum of one year, to the Department to verify compliance with the requirements of the rule.

Corrective Action Plan Due: 01/21/2023



Domain: 05 Health & Safety

Rule: 5101:2-12-16 First Aid/Standard Precautions

Code: The program is required to have a first aid kit onsite.

Finding: 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 number(s) 15 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 required at this time.

Corrective Action Plan Due: 01/21/2023

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.



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

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

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

Corrective Action Plan Due: 01/21/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to be onsite at the program for the required amount of time.

Finding: During the inspection, it was determined that the program did not have at least one administrator onsite for 50 percent of the program's operating hours or 40 hours a week, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023



Domain: 08 Staff Files

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

Code: 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.

Finding: 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) 1-6 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: 01/21/2023

Domain: 08 Staff Files

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

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

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 2,4 below:

1. First Aid – child care staff members scheduled during the hours of [] and [] had expired training
2. First Aid – child care staff members scheduled during the hours of 6am and 330pm did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of 6am and 6pm had expired training
5. CPR – child care staff scheduled during the hours of [] and [] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training



9. Communicable Disease – child care staff members scheduled during the hours of [] and [] had expired training
10. Communicable Disease – child care staff scheduled during the hours of [] and [] had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [] and [] had expired training
13. Child Abuse – child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

Finding: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 3 below:

1. The JFS 01176 Program Notification of Background Check Review for Child Care from the Department was not on file and the individual was not left alone with children.
2. The JFS 01177 Individual Notification of Background Check Review for Child Care was on file instead of the JFS 01176.
3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements



Code: The program administrator is required to have hours of availability to meet with parents and have the hours posted in a noticeable location.

Finding: During the inspection, it was determined that the administrator did not have scheduled hours of availability to meet with parents, or the hours of availability were not posted in a noticeable location. 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: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 4,5,6 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: []

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

Corrective Action Plan Due: 01/21/2023

Domain: 08 Staff Files



Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program is required to maintain documentation onsite at the program for each employee.

Finding: During the inspection, it was determined that required staff record documentation was not on file at the program, and was not verified in the OPR, for the employee(s) listed on the Employee Record Chart. The documentation was able to be verified as noted in number(s) 2 below:

1. The information had been verified at the previous inspection.
2. The information was provided from another location during the inspection.

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

Corrective Action Plan Due: 01/21/2023

Domain: 08 Staff Files

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

Code: The program is required to have staff complete the online staff orientation training before they are permitted to have sole responsibility of children.

Finding: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/21/2023

Domain: 08 Staff Files

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

Code: 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.

Finding: 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: 01/21/2023

Domain: 09 Children's Files

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

Code: The program is required to maintain a complete JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file for any child having a health condition.

Finding: In review of the children's records, it was determined that the JFS 01236 "Child Medical/Physical Care Plan for Child Care" did not meet the requirements of the rule as noted in number(s) 3 below:

1. The JFS 01236 had not been updated as needed and at least annually.
2. A separate JFS 01236 had not been used for each condition.
3. The program used an old version of the JFS 01236.

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

Corrective Action Plan Due: 01/21/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

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

Finding: 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(s) 1,8 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: 01/21/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

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

Finding: 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 number(s) 10,13 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: 5101:2-12-07 Written Program Policies and Procedures

Code: The program's handbook is required to be available at the program and must be given to all parents and employees.

Finding: During the inspection, it was determined that written policies and procedures listed in appendix B of this rule, or revisions, were not provided as noted in number(s) 4 below:

1. A copy of the written policies and procedures was not given to at least one parent.
2. A copy of the written policies and procedures was not given to at least one employee.
3. The written policies and procedures were not available at the program.
4. Other- The current written policies and procedures were not available at the program.

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

Corrective Action Plan Due: 01/21/2023

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-16 Written Disaster Plan

Code: 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.

Finding: 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(s) 1,2 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: 01/21/2023

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
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 7-20-23.
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	