



## 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 Little Sprouts Learning Academy, LLC	Program Number 2190019607	Program Type Child Care Center	
Address 10200 Hamilton Ave. Cincinnati OH 45231		County HAMILTON	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 06/09/2021	Food Service Risk Level		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 01/13/2022	Begin Time 10:10 AM	End Time 1:15 PM
Reviewer: KEYAUNA BABER		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 18	No. Serious Risk 0	No. Moderate Risk 2	No. Low Risk 26

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)		4	0	4
Young Toddler		3	0	3
<b>Total Under 2 ½ Years</b>	14	7	0	7
Older Toddler		0	0	0
Preschool		8	0	8
School Age		0	16	16
<b>Total Capacity/Enrollment</b>	46	8	16	31

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



Infant	0 to < 12 months	1 to 5	Combined with toddlers
Infant	0 to < 12 months	1 to 5	Combined with toddlers
PS	3 years to < 4 years	1 to 4	
PS	3 years to < 4 years	1 to 4	
SA	School-Age to < 11 years	1 to 10	
SA	School-Age to < 11 years	1 to 10	

**Summary of Non-Compliances**

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

**Serious Risk Non-Compliances**

**No Serious Risk Non-Compliances were observed during this inspection**

**Moderate Risk Non-Compliances**

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Equipment

**Code:** The program is required to refrain from using space heaters unless it has been approved by a fire official.

**Finding:** During the inspection, it was determined that a space heater which had not been approved by a fire official was in use in the area identified in number(s) 2 below:

1. The administrator’s office.
2. A classroom.
3. The break room.
4. Several classrooms.
5. The hallway.
6. The entry way.
7. Other [ ].



The use of this space heater must be discontinued until approval for its use has been obtained. Submit the program's corrective action plan, which includes written fire approval for use of this space heater or a written statement that the space heater is no longer being used at the program, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/13/2022

**Domain: 05 Health & Safety**

Rule: 5101:2-12-22 Meal and Snack Requirements

Code: Meals and snacks provided or served by the program must include all required food groups and meet the recommended daily dietary allowances as specified by the USDA.

Finding: During the inspection, it was determined that a meal or snack at the program did not meet the requirements as noted in number(s) 1, 8, 9 below:

1. The breakfast served did not include foods from three of the four food groups.
2. Snack served did not include foods from two of the four food groups.
3. The meal did not provide 1/3 of the recommended daily dietary allowances as specified by the USDA.
4. Juice used to meet the fruit or snack component was not 100% undiluted fruit or vegetable juice.
5. The meal served did not include an item from the meat or meat alternative group.
6. The meal served did not include an item from the bread or grain group.
7. The meal served did not include two items from the fruit/vegetable group.
8. The meal served did not include a vegetable (two fruits were served).
9. The meal served did not include a serving of fluid milk.

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

Corrective Action Plan Due: 02/13/2022

**Low Risk Non-Compliances**

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Sanitary Equipment and Environment

Code: The program is required to provide a clean restroom with the appropriate materials available.



Finding: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 4, 5, 6, 9 below, were in the hallway restroom:

1. There was no liquid soap.
2. There was no toilet paper.
3. There were no paper towels.
4. The toilet cleaning brush was accessible to the children.
5. The plunger was accessible to the children.
6. The toilet(s) were not flushed.
7. The trash was not emptied from the day before.
8. There was a strong urine odor.
9. Other: unclean toilet.

The restroom(s) must be kept sanitary at all times. 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: 03 Postings & Equipment**

Rule: 5101:2-12-17 Materials and Equipment

Code: The program is required to have play materials accessible and orderly.

Finding: During the inspection, it was determined that play materials were not accessible/orderly for the following reason(s) as noted in number(s) 1, 2 below:

1. Play materials were not readily accessible to the children in the infant classroom;
2. Play materials were not arranged in an orderly manner so that children have opportunities to select, remove and replace play materials with minimal assistance during the day in the [ ] classroom.

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: 03 Postings & Equipment**

Rule: 5101:2-12-17 Materials and Equipment

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



Finding: During the inspection, it was determined that equipment and materials in at least five of the nine categories listed below were not provided in sufficient quantities for the school-age children in the school age classroom, as required by the rule:

1. Art supplies;
2. Manipulative materials and equipment;
3. Blocks;
4. Science-nature equipment;
5. Language arts and auditory materials and equipment;
6. Music equipment;
7. Transportation materials and equipment;
8. Sports and gross motor equipment;
9. Pretend or dramatic play materials.

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: 03 Postings & Equipment**

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

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

Finding: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number(s) 8 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [ ].

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



Corrective Action Plan Due: 02/13/2022

**Domain: 03 Postings & Equipment**

**Rule:** 5101:2-12-17 Materials and Equipment

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

**Finding:** During the inspection, it was determined that equipment and materials in the following categories 4 were not provided in sufficient quantities for children in the toddler/preschool classroom, as required by the rule:

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.

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: 04 Indoor/Outdoor Space**

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

**Code:** The program is required to have an outdoor play space free from general hazards.

**Finding:** During the inspection, it was determined that hazardous conditions existed in the outdoor play area, as noted in number(s) 8 below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.



6. There were thistles with pricklers.
  7. There were bird droppings.
  8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
  9. The sandbox was contaminated.
  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: 02/13/2022

**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: 02/13/2022

**Domain: 05 Health & Safety**

Rule: 5101:2-12-22 Meal and Snack Requirements

Code: The program is required to post the current weekly menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Finding: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 2, 3, 6 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

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: 06 Program Information**

Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to have all drivers transporting children complete the driver training.

Finding: During the inspection, it was determined that at least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training as noted in number(s) 1 below:

1. No documentation on file
2. Incomplete documentation

Please refer to the Employee Record Chart which indicates any driver needing current documentation of completion of this training. Complete the training as discussed. 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: 02/13/2022

**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to have children and staff practice and document safely exiting vehicles during an emergency.

Finding: During the inspection, it was determined that the program had not conducted and/or documented monthly emergency exiting drills on vehicles with children, including the date of the drill and all staff who transport children. 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: 02/13/2022





**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation - Vehicle Requirements

Code: The program is required to complete and document weekly inspections of vehicles used to transport children.

Finding: During the inspection, it was determined that the program had not performed and/or documented weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

1. A visual inspection of the tires for wear and tire pressure
2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges
3. An inspection for properly functioning child and driver restraints
4. An inspection for properly functioning doors and windows
5. An inspection for, and cleaning of, debris from inside the vehicle

Submit the program's corrective action plan, which includes a copy of the documented weekly inspection of vehicles, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/13/2022

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-20 Cribs

Code: The program is required to provide clean sheets for all cribs that are not too large or too small for the crib.

Finding: During the inspection, it was determined that sheets did not meet the rule requirement as noted in number(s) 2 below:

1. At least one crib did not have a sheet.
2. At least one sheet was too large.
3. At least one sheet was too small.
4. At least one sheet was torn.
5. Crib sheets were not clean.

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 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: 02/13/2022

**Domain: 08 Staff Files**

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

Code: The program is required to have staff complete training in child abuse and neglect recognition and prevention within sixty days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed training in child abuse and neglect recognition and prevention as noted in number(s) 1 below:

1. The training was not completed within sixty days of hire.
2. The training was expired, as it is only valid for two years.

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

Corrective Action Plan Due: 02/13/2022



**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: 02/13/2022

**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.

**Finding:** In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 02/13/2022

**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.

**Finding:** In review of the staff records, it was determined that verification of a high school education was not on file for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's



corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/13/2022

**Domain: 08 Staff Files**

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

**Code:** The program is required to have the current rules available in a noticeable area.

**Finding:** During the inspection, it was determined the current licensing rules were not available or available in a noticeable area on the premises. 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:** 5101:2-12-10 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: 02/13/2022



**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: 02/13/2022

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-07 Administrator Qualifications

**Code:** The program administrator is required to complete the rules course review within the defined time period.

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

Corrective Action Plan Due: 02/13/2022

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-08 Medical Statement

**Code:** The program staff medicals are required to include all information.

**Finding:** In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 4.

1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that 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);
4. Tuberculosis (TB) screening/test
  - 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 4a;
  - 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: 02/13/2022

**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) 1, 4 below:

1. First Aid – child care staff members scheduled during all operating hours had expired training
2. First Aid – child care staff members scheduled during the hours of [ ] and [ ] 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 all operating hours 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: 02/13/2022

**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) 8, 10, 13, 14, 15 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: 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, 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: 02/13/2022

**Domain: 10 Written Policies & Procedures**

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

Code: The program is required to have a written disaster plan.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 1 below:

Procedures:

1. The written disaster plan had not been completed
2. The plan was not provided to all child care staff and employees
3. The plan was not used to respond to an emergency or disaster situation





4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
  5. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
  6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
  7. Outbreaks, epidemics or other infectious disease emergencies
  8. Loss of power, water, or heat
  9. Other threatening situations that may pose a health or safety hazard to the children in the program
- Details:
10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
  11. Assisting infants and children with special needs and/or health conditions
  12. Emergency contact information for parents and the program
  13. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
  14. Procedures for communicating with parents during loss of communications, no phone or internet service available
  15. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
  16. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
  17. Making the plan available to all child care staff members and employees
  18. Training of staff or reassignment of staff duties as appropriate
  19. Updating the plan on a yearly basis
  20. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program's corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/13/2022

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
5101:2-12-04 Fire Inspection	Compliant	
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: DBUE-BVWLN, 3-1-22.
5101:2-12-07 Written Program Policies and Procedures	Compliant	
5101:2-12-09 Background Check Requirements	Compliant	
5101:2-12-11 Indoor Space Requirements	Compliant	
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
5101:2-12-11 Outdoor Play Equipment	Compliant	
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field Trip Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care Plans	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	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 Daily Outdoor Play	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 Ratio	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 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk 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
5101:2-12-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet Training	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	