

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

|  | Program Deta                         | nils            |                    |
|--|--------------------------------------|-----------------|--------------------|
| Program Name   | Program Number                       |                 | Program Type       |
| Complete Care Development Center LLC                 | 2190020846                           |                 | Child Care Center  |
| Address<br>3557 Springdale rd cincinnati<br>OH 45251 |                                      |                 | County<br>HAMILTON |
| Building Approval Date<br>07/10/2013                 | Use Group/Code<br>E with I-2         | Occupancy Limit | Maximum Under 2 ½  |
| Fire Inspection Approval Date 01/09/2023             | Food Service Risk Level<br>Level III |                 |                    |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection So                  | cope             | Inspection Notice |              |
| Annual                     | Full                           |                  | Unannounced       |              |
| Inspection Date 09/06/2023 | Begin Time 1                   | .0:50 AM         | End Time 3:32 PM  |              |
| Reviewer:<br>ZIBUTE OSGOOD |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 6                              | 0                | 0                 | 6            |

| 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)                                  |                  | 3          | 0         | 3     |  |
| Young Toddler   |                  | 6          | 0         | 6     |  |
| Total Under 2 ½ Years                                     | 28               | 9          | 0         | 9     |  |
| Older Toddler   |                  | 2          | 0         | 2     |  |
| Preschool   |                  | 12         | 0         | 12    |  |
| School Age  |                  | 7          | 0         | 7     |  |
| Total Capacity/Enrollment                                 | 46               | 21         | 0         | 30    |  |

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

| Infants   | 0 to < 12 months         | 1 to 3  | 2 infants, 1       |
|-----------|--------------------------|---------|--------------------|
|           |                          |         | toddler, observed  |
|           |                          |         | at arrival & lunch |
| Toddlers  | 18 months to < 30 months | 1 to 6  | 18 months to 36    |
|           |                          |         | months, observed   |
|           |                          |         | at arrival & lunch |
| Preschool | 3 years to < 4 years     | 1 to 11 | 3's & 4's,         |
|           |                          |         | observed at        |
|           |                          |         | arrival            |
| Preschool | 3 years to < 4 years     | 2 to 11 | 3's & 4's,         |
|           |                          |         | observed at lunch  |

### **Summary of Non-Compliances**

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

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

|      | Moderate Risk Non-Compliances   |  |  |
|------|---|--|--|
| No I | No Moderate Risk Non-Compliances were observed during this inspection |  |  |
|      | No Moderate Kisk Non-Compliances were observed during this hispection |  |  |
|      |   |  |  |
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#### **Low Risk Non-Compliances**

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

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

<u>Finding</u>: During the inspection, it was determined that handwashing requirements were not followed as listed in number 5 (an infant after a diaper change) below, as required in rule.

- 1. At least one staff/child did not wash their hands upon arrival for the day.
- 2. At least one staff/child did not wash their hands prior to departure.
- 3. At least one staff did not wash their hands upon entry into a classroom.
- 4. At least one staff/child did not wash their hands after toileting or assisting a child with toileting.
- 5. At least one staff/child did not wash their hands after each diaper change or pull-up change.
- 6. At least one staff did not wash their hands after contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
- 7. At least one child did not wash their hands after contact with bodily fluids.
- 8. At least one child did not wash their hands after returning inside after outdoor play.
- 9. At least one staff did not wash their hands after cleaning or sanitizing or using any chemical products.
- 10. At least one staff/child did not wash their hands after handling pets, pet cages or other pet objects that have come in contact with the pet.
- 11. At least one staff did not wash their hands before eating, serving or preparing food or bottles or feeding a child.
- 12. At least one child did not wash their hands before eating or assisting with food preparation.
- 13. At least one staff did not wash their hands before and after completing a medical procedure or administering medication.
- 14. At least one child did not wash their hands after water activities.
- 15. At least one staff/child did not wash their hands when visibly soiled (must use soap and water).
- 16. Other [].

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

Corrective Action Plan Due: 10/06/2023

Domain: 02 Safe & Sanitary Environment

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

<u>Code</u>: The program is required to follow the cleaning schedule for equipment.

<u>Finding</u>: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in numbers 5, 30, 31, 32 below:

- 1. Item(s) soiled with blood or bodily fluids were not cleaned/sanitized immediately.
- 2. Blankets/sheets were not cleaned weekly, when soiled, or before use by another child.
- 3. Children's individual blankets and belongings were stored in an unsanitary manner.
- 4. Bottles, bottle caps, nipples and other equipment used for bottle feeding were not cleaned and sanitized in a dishwasher or by washing, rinsing, and boiling for one minute.
- 5. Carpets were not vacuumed weekly or cleaned when soiled.
- 6. Changing table/pad was not sanitized after each use or cleaned when visibly soiled.
- 7. Reusable cloths were not being washed daily or when visibly soiled.
- 8. Cots/Pads/Mats were not cleaned and sanitized before assigning to a different child, when used by a sick child, when soiled or at least every three months.
- 9. Cribs were not cleaned and sanitized monthly, or when soiled, or before use by another child.
- 10. Diaper Receptables were not cleaned and sanitized daily or more frequently as needed to eliminate odor.
- 11. Dishes/Cups/Silverware were not cleaned and sanitized after each use.
- 12. Water Containers were not labeled with the child's name, or were not cleaned and sanitized before use again on another day.
- 13. Dividers were not cleaned when visibly soiled.
- 14. Dress up clothes and hats (dramatic play) were not cleaned monthly or when soiled.
- 15. Floors were not cleaned weekly or when soiled.
- 16. The food prep area, including sinks, were not cleaned before and after preparing food (including bottle preparation) or between preparing raw or cooked food.
- 17. Potty chairs were not cleaned after each use, rinsed with water, cleaned and sanitized or contents were not emptied into a toilet.
- 18. Food tables, highchair trays were not cleaned before and after each use.
- 19. Tables used for play were not cleaned when visibly soiled or sanitized daily.
- 20. Toilet bowls were not cleaned when visibly soiled or sanitized weekly.
- 21. Toilet seat(s), handle(s) and hand washing sink(s) were not cleaned when visibly soiled or sanitized daily.
- 22. Mouthed toys were not cleaned and sanitized after each child's use.
- 23. Toys, other than those mouthed by children, were not cleaned monthly or when visibly soiled.
- 24. Washable furniture, including fabrics on infant equipment, were not cleaned weekly or when soiled.
- 25. Upholstered furniture was not steam cleaned when soiled.
- 26. Slip covers were not washed at least every six months or when soiled.
- 27. Wastebaskets/rinse buckets, including lids, were not being emptied daily or cleaned and sanitized when visibly soiled.
- 28. The manufacturer's directions for the cleaning product were not followed.
- 29. The solution used for sanitizing was not a commercial product registered by the United States Environmental Protection Agency as a sanitizer.
- 30. An air vent in the school age room was dirty.
- 31. Walls in the school age room were dirty.
- 32. The vinyl floor in the restroom across from the toddler room was peeling, preventing appropriate sanitation.

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to 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 not required at this time.

#### Domain: 05 Health & Safety

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

<u>Code</u>: The program is required to refrain from using televisions, computers, and other screens during meals and snacks.

<u>Finding</u>: During the inspection it was determined that a television was on during lunch in the infant room. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

#### **Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-23 Infant Bottle and Food Preparation

Code: The program is required to obtain written instructions from parents regarding feeding their infant.

<u>Finding</u>: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review were missing information as noted in number 5 below:

- 1. Written instructions were not on file.
- 2. Type of food and/or formula/breast milk was missing.
- 3. Amount of food and/or formula/breast milk was missing.
- 4. Feeding times or frequency of feedings was missing.
- 5. The written instructions on file had not been updated.

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 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 5 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: 10/06/2023

#### **Domain: 09 Children's Files**

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

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

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 4, 6 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.

## **Rules In-Compliance/Not Verified**

| Rule: 5101:2-12-02 License Posted               | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: The license was in a location visible to parents as required.  |
|---|---------------------|--|
| Rule Rule: 5101:2-12-02 Current Information     | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule regarding maintaining current information in the Ohio Child Licensing and Quality System were discussed. |
| Rule Rule: 5101:2-12-03 Inspection Reguirements | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule  |

regarding compliance inspections were discussed. The administrator was on-site

for the inspection.

| Rule                                 | Status              | Documenting Statement(s), If applicable  |
|--------------------------------------|---------------------|--|
| 5101:2-12-04 Building Department     | Compliant           |  |
| Inspection                           |                     |  |
|                                      |                     |  |
| Rule                                 | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-04 Fire Inspection         | Compliant           |  |
|                                      |                     |  |
| D. I.                                | Chahara             | December 2 Chapter and (a) If and include  |
| Rule: 5101:2-12-04 Food Service      | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: The food service |
| Requirements                         | Compliant           | license was observed posted. Following is  |
| Requirements                         |                     | the audit number and date of expiration:   |
|                                      |                     | VWAR-CPSKZY, exp. 03/01/2024.  |
|                                      |                     | VWAN-CF3κ21, εxp. 03/01/2024.  |
| Rule: 5101:2-12-04 Food Service      | Compliant           | Documenting Statement: The off-site  |
| Requirements                         |                     | food processing establishment's current  |
|                                      |                     | Ohio Department of Agriculture   |
|                                      |                     | registration information was observed  |
|                                      |                     | during the inspection.   |
|                                      |                     | ,  |
|                                      |                     |  |
| Rule                                 | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator           | Compliant           |  |
| Qualifications                       |                     |  |
| 0.1                                  |                     | S (/ ) (f )  |
| Rule                                 | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator           | Compliant           |  |
| Responsibilities/Requirements        |                     |  |
| Rule                                 | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Written Program         | Compliant           | 200amental gottee monte (e), in approach   |
| Policies and Procedures              |                     |  |
|                                      |                     |  |
| Rule                                 | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Medical Statement | Compliant           | Documenting Statement: All employees   |
|                                      |                     | had current medical statements on file.  |
|                                      |                     |  |
|                                      |                     |  |
| Rule                                 | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Orientation       | Compliant           | Documenting Statement: During the  |
| Training & Whistle Blower Protection |                     | inspection, the requirements of the rule   |
|                                      |                     | regarding orientation training and whistle                                       |
|                                      |                     | blower protection were discussed.  |
|                                      |                     |  |
| Rule                                 | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check  | Compliant           | Documenting Statement: During the  |
| Requirements                         | 2 - 11 - 1 - 1 - 1  | inspection, the required documentation   |
| - 4                                  | <u> </u>            |  |

|                                     |           | regarding background checks was on file   |
|-------------------------------------|-----------|---|
|                                     |           | for all employees listed.   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-10 Professional           | Compliant | Section 1 May 1 Property  |
| Development Requirements            |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space           | Compliant |   |
| Requirements                        |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Separation of Children | Compliant | bocumenting statement(s), it applicable   |
| Under 2 1/2 Years                   |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Space    | Compliant | Documenting Statement: During the   |
| Requirements                        |           | inspection, the requirements of the rule  |
|                                     |           | regarding playground inspection reports   |
|                                     |           | were discussed.   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | Joseph Grand Company  |
| , , ,                               | '         |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-12 Safe Equipment   | Compliant | Documenting Statement: Equipment was observed to be in good condition.          |
|                                     |           | observed to be in good condition.   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-12 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.  |
|                                     |           | I   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Smoke Free             | Compliant |   |
| Environment                         |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-15 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. |
|                                     |           | for the children with health conditions.  |

| Rule                                | Status    | Documenting Statement(s), If applicable   |
|-------------------------------------|-----------|---|
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: On the day of      |
| and General Emergency Plan          |           | the inspection, the complete prescribed   |
|                                     |           | JFS 01242 "Medical, Dental, and General   |
|                                     |           | Emergency Plan For Child Care" were       |
|                                     |           | posted in the program as required.        |
|                                     |           | posted in the program as required.        |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Emergency Drills       | Compliant | bocumenting statement(s), it applicable   |
| 3101.2-12-10 Efficigency Drills     | Compilant |   |
|                                     |           | I   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 1 1                                 |           | Documenting Statement(s), if applicable   |
| 5101:2-12-16 First Aid/Standard     | Compliant |   |
| Precautions                         |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Management of          | Compliant |   |
| Communicable Disease                |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Incident/Injury        | Compliant |   |
| Reporting                           | '         |   |
| persuig                             |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: Annual training    |
|                                     | Compliant | 9   |
| Plan                                |           | of the written disaster plan was          |
|                                     |           | completed by staff.                       |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Daily Schedule   | Compliant | Documenting Statement: Daily schedules    |
|                                     |           | were observed posted.                     |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Materials and    | Compliant | Documenting Statement: Sufficient         |
| Equipment                           | · .       | equipment was observed in all categories. |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Outdoor Play     | Compliant | Booking statement(J), it applicable       |
| 3101.2 12 17 Daily Outdool Flay     | Compliant |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| nuic                                | Jiaius    | Documenting Statement(s), it applicable   |

| Rule: 5101:2-12-18 License Capacity | Compliant           | Documenting Statement: The program was operating within their license capacity limits.   |
|-------------------------------------|---------------------|--|
|                                     | Ι                   |  |
| Rule: 5101:2-12-18 Ratio            | Compliant           | Documenting Statement(s), If applicable  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: 5101:2-12-18 Ratio            | Compliant           | Documenting Statement: Staff/child ratios observed during the inspection were in compliance.   |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-18 Group Size       | Compliant           | Documenting Statement: The group sizes observed on the day of the inspection were in compliance.   |
|                                     | Louis               |  |
| Rule: 5101:2-12-18 Attendance       | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: Child Care Staff   |
| Records                             | Сотрианс            | Members were observed recording the attendance for each child upon arrival and documenting each child's departure.   |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-19 Supervision            | Compliant           | bootinenting statement(s); ii applicable   |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-19 Child Guidance         | Compliant           | Documenting Statement(s), if applicable  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-20 Cots and Napping | Compliant           | Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children.  |
| Rule: 5101:2-12-20 Cots and Napping | Compliant           | Documenting Statement: Cots were placed appropriately and safely during nap time.  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| Nuit                                | Status              | Documenting statement(s), if applicable  |

| Rule: 5101:2-12-20 Cribs              | Compliant | Documenting Statement: All cribs were labeled with the assigned infant's name. |
|---------------------------------------|-----------|--|
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-22 Fluid Milk Requirements  | Compliant |  |
| Bula                                  | Chatus    | Decumenting Statement(s) If applicable   |
| Rule 5101:2-12-22 Safe Food           | Status    | Documenting Statement(s), If applicable  |
| Handling/Storage                      | Compliant |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-23 Infant Daily Care  | Compliant | Documenting Statement: Appropriate   |
| Rule. 3101.2-12-23 Illiant Daily Care | Compilant | daily written records for all infants were viewed.                             |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-23 Diapering and      | Compliant | Documenting Statement: Appropriate   |
| Toilet Training                       |           | diaper changing procedures were  |
|                                       |           | observed during the inspection in the infant room.                             |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-25 Medication               | Compliant |  |
| Administration                        |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Child Care Staff   | Compliant | Documenting Statement: All Child Care  |
| Member Educational Requirements       | •         | Staff Members had verification of  |
| ·                                     |           | educational requirements on file at the program.                               |
|                                       |           |  |