

# **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
Little Fingers Little Toes Childcare Center	2200022533		Child Care Center
Address 676 Mentor Ave painesvillie	l		County LAKE
OH 44077			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
08/05/2020	E	51	
Fire Inspection Approval Date	Food Service Risk Level		
06/29/2022	Level III		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 11/07/2023	Begin Time 9	:30 AM	End Time 12:18 PM	
Reviewer: MARY WOODLAND				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	15	0	6	12

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)		9	0	9
Young Toddler		6	0	6
Total Under 2 ½ Years	21	15	0	15
Older Toddler		5	1	6
Preschool		22	3	25
School Age		0	23	23
Total Capacity/Enrollment	36	27	27	69

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

Baby Bees (I)	0 to < 12 months	1 to 5	At Arrival
Baby Bees (I)	0 to < 12 months	2 to 6	2nd
Running Bees (T)	18 months to < 30 months	2 to 9	At Arrival
Running Bees (T)	18 months to < 30 months	2 to 10	During Activities
Running Bees (T)	18 months to < 30 months	1 to 10	2nd-Out of Ratio
Jumping Bees (PS)	3 years to < 4 years	2 to 16	At Arrival
Jumping Bees (PS)	3 years to < 4 years	2 to 18	During Activities
Buzzing Bees (SA)	School-Age to < 11 years	1 to 23	At Arrival-Out of
			Ratio
Buzzing Bees (SA)	School-Age to < 11 years	1 to 23	2nd-Out of
			Compliance

# **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: 00 License & Approvals

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

<u>Code</u>: The program is required to refrain from using space that did not receive building approval and from caring for children in spaces not approved for that age group. The program is required to refrain from using a remodeled or modified space before obtaining building approval. The program is required to maintain building occupancy limitations.

<u>Finding</u>: During the inspection, it was determined the program was using space for child care in a manner that was not approved by the Ohio Department of Commerce or local certified building authority as noted in number(s) 5 below:

- 1. The [ ] room or space was not approved.
- 2. Children under school age were being cared for in a building only approved for school age.
- 3. The space had been modified and not yet re-inspected and approved.
- 4. The [ ] floor, which had not been approved by the building department for child care, was being used.
- 5. The building limitation had been exceeded. 57 children were being cared for and the building had been approved for 51 children.
- 6. The [ ] room(s) occupancy had been exceeded. [ ] children were being cared for in this space that had been approved for [ ] children.
- 7. Care was provided to [ ] children less than two and one-half years of age. This violated the program's building code limitation in that, [ ].

Submit the program's corrective action plan, which includes building approval for use of this space, a written statement that the building occupancy limitations are being maintained, or a written statement that it is no longer being used, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/07/2023

# **Domain: 00 License & Approvals**

Rule: 5101:2-12-04 Fire Inspection

<u>Code</u>: The program is required to have all spaces used for child care inspected by the fire department or the state fire marshal's office prior to serving children. The program is required to obtain a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection. If violations are noted during the inspection, the program is required to have all violations corrected and have the program reinspected to obtain a completed fire form.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for fire inspection as noted in number(s) 1 below:

- 1. The program did not have documentation on file for a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection and the request for the new inspection was not made at least 30 days prior to the expiration of the previous fire inspection.
- 2. The documentation for the most recent fire inspection contained violations that had not been corrected.
- 3. The [ ] space was being used and had not been approved by the fire department or the state fire marshal's office for child care.

Submit the program's corrective action plan, which includes an updated fire inspection without any uncorrected violations, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/07/2023



Domain: 00 License & Approvals

Rule: 5101:2-12-18 License Capacity

Code: The program is required to maintain the capacity that is indicated on the license.

<u>Finding</u>: During the inspection, it was determined that there were 57 total children with 10 children under 2 1/2. The program is currently licensed to serve 36 total children, with no more than 21 children under 2 1/2. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/07/2023

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.

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

The ratio determined for the School-Age group was 1 Child Care Staff Member(s) for 23 children. Additionally, a ratio of 1 Child Care Staff Member(s) for 10 children was determined for the Toddler 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: 12/07/2023

# **Domain: 06 Program Information**

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

<u>Code</u>: The program is required to use the correct vehicle type as specified in rule. The program is also required to have all vehicles used to transport children inspected by an ASE certified mechanic, FMCSA inspector or the State Highway patrol annually, and correct all repairs that are listed on the vehicle inspection report.

<u>Finding</u>: During the inspection, it was determined the program used a vehicle to transport children that was not approved and/or did not have a current annual vehicle inspection indicating the vehicle was mechanically safe as noted in number(s) 4 below:

1. The program used a converted cargo van or passenger vans designed to carry ten or more passengers. The program must cease the use of this vehicle immediately.

- 2. The vehicle was not inspected.
- 3. The vehicle was inspected by someone other than an ASE certified mechanic, federal motor carrier safety administration (FMCSA) safety inspector or the Ohio State Highway Patrol.
- 4. The vehicle inspection was not updated annually (Honda Odyssey VIN 1902).
- 5. The vehicle inspection completed from the Ohio Highway Patrol did not meet the rule requirement.
- 6. The annual safety check of the vehicle(s) used by the program to transport children noted repairs or corrections that had not been completed and/or documented. The safety violations need to be corrected immediately.

Submit the program's corrective action plan, which includes either discontinuing the use of the vehicle, documentation for any new vehicle now being used to transport children, or a copy of the JFS 01230 "Vehicle Inspection Report for Child Care Centers", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/07/2023

# Domain: 08 Staff Files

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

<u>Code</u>: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

<u>Finding</u>: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 4 below:

- 1. The request for a background check for child care was not submitted in the OPR.
- 2. The fingerprints were not submitted electronically according to the process established by BCI.
- 3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
- 4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/07/2023



# **Low Risk Non-Compliances**

# Domain: 01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

<u>Code</u>: 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 including responding to the child's basic needs and protecting them from harm.

<u>Finding</u>: During the inspection, it was determined that children were not being properly supervised as noted in number(s) 1 below:

- 1. Child(ren) were not within both sight and hearing of a child care staff member during indoor play.
- 2. Child(ren) were not within both sight and hearing of a child care staff member during outdoor play.
- 3. Child(ren) were not within both sight and hearing of a child care staff member more than once.
- 4. Staff were not physically present in the space and near enough to respond and reach the child(ren) immediately.
- 5. Other: [ ].

Children must be supervised according to rule and within both 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: 12/07/2023

# Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2; 4 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.

- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 12/07/2023

### Domain: 05 Health & Safety

Rule: 5101:2-12-22 Fluid Milk Requirements

<u>Code</u>: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

<u>Finding</u>: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number(s) 3; 4 below:

- 1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
- 2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
- 3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
- 4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
- 5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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: 5101:2-12-20 Cribs

<u>Code</u>: The program is required to provide cribs with mattresses in good condition and sheets that are not too large or too small for the crib.

<u>Finding</u>: During the inspection, it was determined that sheets, mattresses and/or mattress covers 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. The mattress was not at least one and one-half inches thick.
- 6. The mattress was not firm.
- 7. There was space between the mattress and the sides and end panels of the crib which exceeded one and one-half inches.
- 8. The mattress cover was not waterproof.
- 9. The mattress cover was torn.
- 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: 12/07/2023

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

Rule: 5101:2-12-20 Cribs

Code: The program is required to provide a safe and sufficient barrier to separate the play and sleeping space.

<u>Finding</u>: During the inspection, it was determined that the barrier between the play and sleeping space did not meet the requirements as noted in number(s) 6 below:

- 1. No barrier had been provided
- 2. The barrier did not prevent the infants from entering the sleeping area.
- 3. The barrier was not safe.
- 4. The barrier was not sturdy.
- 5. The barrier impaired staff's ability to see and hear all sleeping infants in their cribs.
- 6. The barrier was inadequate.
- 7. 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: 08 Staff Files**

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

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

<u>Finding</u>: 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 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: 12/07/2023

#### **Domain: 08 Staff Files**

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

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

<u>Finding</u>: 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) 2 below:

1. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.



2. 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: 12/07/2023

#### **Domain: 08 Staff Files**

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

<u>Code</u>: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

<u>Finding</u>: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1 below:

- 1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
- 2. Documentation of completing the training after December 31, 2016 was not on file.
- 3. Completion of the training was not verified in the OPR.
- 4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 12/07/2023

#### Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 1; 2; 5b & 5c below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;

- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 6. Tuberculosis (TB) screening/test information was missing:
- a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
- b. Results of a TB test for employees meeting both criteria in 6a.
- c. Results of additional testing for employees with a positive TB test.
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/07/2023

#### **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(s) 4 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: 12/07/2023

#### Domain: 09 Children's Files

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

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

<u>Finding</u>: 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: 12/07/2023

## Domain: 09 Children's Files

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

 $\underline{\underline{Code}} : The \ program \ is \ required \ to \ use \ the \ updated \ JFS \ 01234 \ "Child \ Enrollment \ and \ Health \ Information \ For \ Child \ Updated \ JFS \ 01234 \ "Child \ Enrollment \ Description \ For \ Child \ Updated \ Description \ Des$ 

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 number(s) 2; 14 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	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-12-02 Current Information	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable

5101:2-12-03 Inspection Requirements	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements	Compilant	license was observed posted. Following is
Requirements		the audit number and date of expiration:
		JCAE-CP766Q and 3/1/24.
		JCAE-CP700Q and 3/1/24.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Professional	Compliant	Documenting Statement: At the time of
Development Requirements	Compliant	the inspection, all child care staff
Development Requirements		members had completed the required
		· · · · · · · · · · · · · · · · · · ·
		amount of professional development
		training.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
		5 " 6" " " " " " " " " " " " " " " " " "
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Officer 2 1/2 fears		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space	Compliant	Documenting Statement: The quarterly
Requirements		playground inspections were completed
		and documented, as required. The most
		recent inspection report form was dated
		10/10/23.
		10/10/25.
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	, , , , , , , , , , , , , , , , , , ,
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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	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field	Compliant	
Trip Procedures		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation -	Compliant	Documenting Statement: The driver(s)
Driver Requirements		had completed the required ODJFS driver
·		training.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	
Plans		
		l l
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-12-16 Medical, Dental, and	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and		Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and		Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified
5101:2-12-16 Medical, Dental, and General Emergency Plan  Rule Rule: 5101:2-12-16 Emergency Drills	Status Compliant	Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.
S101:2-12-16 Medical, Dental, and General Emergency Plan  Rule Rule: 5101:2-12-16 Emergency Drills  Rule	Status Compliant Status Status	Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.

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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		
	<u>.</u>	·
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
	'	
	-	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	<b>6</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	Boodinenting statement(s), it approase
Equipment	Compilant	
Equipment		
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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 Group Size	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 Meal and Snack	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(s), it applicable
5101:2-12-23 Infant Daily Care	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food	Compliant	
Preparation		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet	Compliant	
Training		
L		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication	Compliant	Documenting Statement: There were no
Administration		children on medication at the time of the
		inspection; however, the method of
		storage and practices for the
		administration were reviewed.
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.