



## 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 Lucky Academy LTD	Program Number 2200022632	Program Type Child Care Center	
Address 79 North Wilson Rd Columbus OH 43204		County FRANKLIN	
Building Approval Date 11/09/2020	Use Group/Code E	Occupancy Limit 49	Maximum Under 2 ½ 20
Fire Inspection Approval Date	Food Service Risk Level Level II		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 08/17/2021	Begin Time 9:00 AM	End Time 1:00 PM
Inspection Date 08/18/2021	Begin Time 11:50 AM	End Time 1:30 PM
Reviewer: Rebecca Worrell		
Reviewer: Rebecca Worrell		

Summary of Findings				
No. Rules Verified 57	No. Rules with Non-compliances 19	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 23

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant ( Birth to < 18 m)		7	0	7
Young Toddler		9	0	9
<b>Total Under 2 ½ Years</b>	18	16	0	16
Older Toddler		2	0	2
Preschool		15	0	15
School Age		14	0	14
<b>Total Capacity/Enrollment</b>	49	31	0	47



Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Small Steps Room E	3 years to < 4 years	1 to 2	at arrival
Small Steps Room E	30 months to < 36 months	1 to 2	at nap
Small Steps Room E	30 months to < 36 months	1 to 2	day 2
Inchworm Room B	0 to < 12 months	1 to 3	at nap
Inchworm Room B	0 to < 12 months	1 to 2	day 2
Grasshopper Room D	12 months to < 18 months	1 to 1	at arrival
Grasshopper Room D	12 months to < 18 months	1 to 3	at lunch
Grasshopper Room D	18 months to < 30 months	1 to 2	day 2
Creative Scholars Room A	3 years to < 4 years	1 to 3	day 2
Master Minds Room C	School-Age to < 11 years	0 to 2	at arrival
Master Minds Room C	3 years to < 4 years	1 to 5	Preschool and School age group combined for the day.
Master Minds Room C	School-Age to < 11 years	1 to 9	day 2

**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: 00 License & Approvals**

Rule: 5101:2-12-04 Fire Approval

Code: The program is required to only use space approved by the fire department or the state fire marshal's office to serve children. The program is required to obtain a fire inspection within 12 months from the date of



the last fire approval. If violations are noted during the inspection, the program is required to have all violations corrected and have the program re-inspected to obtain a completed fire form.

Finding: During the inspection, it was determined the program had not obtained written approval from the local fire safety inspector or the state fire marshal as noted in number(s) 1 below:

1. The program had not been inspected and approved within 12 months from the date of the last fire approval and the request for the new inspection was not made at least 30 days prior to the expiration of the previous approval.
2. The fire approval had not been obtained due to violations.
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 approval, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/18/2021

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-19 Supervision

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

Finding: During the inspection, it was determined that children were left unattended while inside the program as noted in number(s) 1 below:

1. Child(ren) were left unattended once. (2 school age children in the classroom at drop off with no supervision)
2. Child(ren) were left unattended more than once.
3. Child(ren) left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other [ ].

Children must be supervised and within sight and hearing of a child care staff member at all times. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/18/2021



**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined the program did not protect children from an unsafe item, condition or equipment noted in number(s) 17 below:

1. Closed ended pull cord(s) on the window blind(s)
2. Extension cord(s); electrical cord(s) attached to an object that could result in a severe injury if pulled.
3. Stacked tables.
4. Folding tables.
5. Matches and/or a lighter.
6. Power tool(s).
7. Live wires.
8. Stove(s) that are either on or able to be turned on by a child.
9. Asbestos.
10. Traffic.
11. A body of water.
12. A well.
13. Environmental hazard(s) confirmed by local authorities having jurisdiction over the hazard.
14. A crockpot used to heat bottles.
15. Immediate access to a knife.
16. Large or heavy pieces of shelving units are not securely anchored to the wall.
17. Exposed: Sharp object protruding from wall in Infant Room at child level

Any hazardous equipment must be removed, replaced, or repaired and any hazardous condition must be corrected and must be made inaccessible to children. Provide staff training. Submit the program's corrective action plan, which includes a statement that the item or condition has been removed and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/18/2021

**Low Risk Non-Compliances**

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to provide sufficient lighting when the children rest, nap, or sleep.



Finding: During the inspection, it was determined that the area used when children rest, nap or sleep was not lighted sufficiently to allow child care staff visual supervision of the children 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 required at this time.

Corrective Action Plan Due: 09/18/2021

### **Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the attendance record for a period of one year.

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

1. No attendance record was being maintained;
2. The attendance record was not being consistently completed;
3. The attendance documentation was not kept at the program for a period of one year.

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: 09/18/2021

### **Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

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

Finding: During the inspection, it was determined that at least one staff member with the Infant group did not wash his or her hands at the time listed in number(s) 5 below, as required in rule:

1. Upon arrival for the day;
2. After breaks;
3. Upon returning from outside;
4. After toileting or assisting a child with toileting;
5. After each diaper change or pull-up change;
6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids;
7. After cleaning or sanitizing or using any chemical products;



8. After handling pets, pet cages or other pet objects that have come in contact with the pet;
9. Before eating, serving or preparing food or bottles or feeding a child;
10. Before and after completing a medical procedure or administering medication;
11. When visibly soiled (must use soap and water);
12. Other [ ].

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

Corrective Action Plan Due: 09/18/2021

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide nonskid rugs and correct any floor hazard that may be unsafe.

Finding: During the inspection, it was determined that the program had an area rug in the Toddler Room that did not lie flat causing a tripping hazard. A walking surface that is not hazardous to children must be maintained at the program. 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: 09/18/2021

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide toys that are not small enough to be a choking hazard for infants and toddlers.

Finding: During the inspection, it was determined there were toys or other items, small enough to be swallowed present, in the space where infants and/or toddlers were in care. 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: 09/18/2021



**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 8 & 12 below:

1. Open pull cords that are not closed loop.
2. Telephone cords.
3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
4. Stacked chairs.
5. Employee(s) purse(s).
6. Diaper bags.
7. Television not securely anchored.
8. Small or lightweight pieces of shelving units are not securely anchored to the wall. (Preschool Room)
9. Smoke detector needing batteries replaced.
10. Staff member stepped over a barrier/gate while holding a child.
11. Emergency exits were blocked by the following classroom furniture: [ ].
12. Broken shelf ledge in Grasshopper Room.

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: 09/18/2021

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

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

Finding: During the inspection, it was determined that at least one child in the Infant group did not wash his or her hands at the time listed in number(s) 2 below, as required in rule:

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



9. Other [ ].

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

Corrective Action Plan Due: 09/18/2021

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use straps on equipment that is manufactured with straps.

Finding: During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number(s) 3 below:

1. The straps were missing on the [ ].
2. The straps were attached, but were not used on the [ ].
3. The straps were attached and were used, but were not used in a safe manner. (Diaper changing station, straps were fastened but not secure to the child)
4. Manufacturer's guidelines for the [ ] were not followed in that [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training has been provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/18/2021

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that at least one area of the program or at least one piece of equipment had chipping or peeling paint. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/18/2021





**Domain: 04 Indoor/Outdoor Space**

**Rule:** 5101:2-12-17 Daily Outdoor Play

**Code:** The program is required to provide daily outdoor play for all children.

**Finding:** During the inspection, it was determined that daily outdoor play was not provided for the Toddler, Preschool and School age groups. 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: 09/18/2021

**Domain: 04 Indoor/Outdoor Space**

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

**Code:** The program is required to have an outdoor play space with a shaded area.

**Finding:** During the inspection, it was determined that a shaded area was needed and had not been provided in the outdoor play area to protect children from prolonged exposure to the sun. 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: 09/18/2021

**Domain: 05 Health & Safety**

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

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

**Finding:** During the inspection, it was determined the program was missing required items listed in appendix A of this rule, that are to be contained in a first aid kit, as noted in number(s) 12 & 14 below:

1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
2. One roll of hypoallergenic first-aid tape.
3. Individually wrapped sterile gauze squares in assorted sizes.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.
6. Gauze rolled bandage.



7. Triangular bandage.
8. Rounded end scissors.
9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).
10. A working digital thermometer.
11. Disposable non-latex gloves.
12. A working flashlight.
13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit.
14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.
15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only).
17. Bottled water (field trip or transporting away from the program only).
18. The program did not have a system to replace items as they were used, expired, damaged or sterile packages were opened.

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: 09/18/2021

**Domain: 05 Health & Safety**

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

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

Finding: During the inspection it was determined that [television/computer/other] were on during meals and snacks. 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: 09/18/2021

**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 required at this time.

Corrective Action Plan Due: 09/18/2021

**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-20 Cribs

**Code:** The program is required to space cribs two feet apart when in use.

**Finding:** During the inspection, it was determined that cribs were not two feet apart when in use, as required by 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: 09/18/2021

**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-23 Diapering and Toilet Training

**Code:** The program staff is required to have adequate supplies for diapering available.

**Finding:** During the inspection, it was determined the required supplies were not available for diaper changing as noted in the following number(s) 2 below:

1. There was no disposable separation material;
2. There was no germicidal solution for sanitizing;
3. There were no plastic containers or bags for the storage of soiled clothing;
4. There was no clean supply of diapers;
5. There was no extra change of clothing;
6. Other [ ].

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



Corrective Action Plan Due: 09/18/2021

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-08 Orientation and Staff Records

**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) 2 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.

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

Corrective Action Plan Due: 09/18/2021

**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 that completed medical examination statement(s) for the employee(s) listed on the Employee Record Chart [was/were] 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: 09/18/2021

**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: 09/18/2021

**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: 09/18/2021

**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) 3, 7, & 15 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had not taken First Aid training
3. First Aid – trained child care staff member was scheduled but not present during the hours of 8:30 and 10:00.
4. First Aid – child care staff member scheduled during the hours of [ ] and [ ] did not have verification of completion of First Aid
5. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
6. CPR – child care staff scheduled during the hours of [ ] and [ ] had not taken CPR training
7. CPR – trained child care staff member was scheduled but not present during the hours of 8:30 and 10:00.
8. CPR – child care staff member scheduled during the hours of [ ] and [ ] did not have verification of completion of CPR
9. CPR – training taken by staff did not include all age groups the program serves
10. Communicable Disease – child care staff members scheduled during the hours of [ ] and [ ] had expired training
11. Communicable Disease – child care staff scheduled during the hours of [ ] and [ ] had not taken Communicable Disease training
12. Communicable Disease – trained child care staff member was not present in each building used by the program
13. Communicable Disease – child care staff member scheduled during the hours of [ ] and [ ] did not have verification of completion of the full Communicable Disease training
14. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
15. Child Abuse – trained child care staff was scheduled but not present during the hours of 8:30 and 10:00.
16. Child Abuse – child care staff scheduled during the hours of [ ] and [ ] had not taken Child Abuse training
17. Child Abuse – child care staff member scheduled during the hours of [ ] and [ ] did not have verification of completion of the full six-hour Child Abuse training
18. Child Abuse – child care staff considered to be providing coverage had only the ODJFS prescribed Child Abuse training, which does not meet this rule compliance

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: 09/18/2021

**Domain: 08 Staff Files**

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

**Code:** The program staff is required to obtain at least 6 hours of professional development annually.



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 6 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. Other [ ].

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

Corrective Action Plan Due: 09/18/2021

**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) 3,4 & 5 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 parent information
4. Complete emergency contact information
5. Complete physician information
6. Information regarding the parent list
7. Health information
8. Additional information for all boxes checked "yes"
9. Emergency transportation information
10. Parent/guardian's signature
11. Diapering Statement
12. Acknowledgement of Policies and Procedures
13. Enrollment form for at least one child was not updated by either the parent or the administrator
14. Enrollment form for at least one child was not signed by the administrator
15. 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 required at this time.

Corrective Action Plan Due: 09/18/2021



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**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.
Rule: 5101:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.
Rule: 5101:2-12-07 Administrator Qualifications	Compliant	
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	
Rule: 5101:2-12-04 Food License	Compliant	Documenting Statement: The caterer's food service license information was observed during the inspection. Following is the audit number and date of expiration: Department of Ag 1/31/2022 # 1180296
Rule: 5101:2-12-04 Food License	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: #9914247 expires 3/1/2022.





Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Sanitary Equipment and Environment	Compliant	Documenting Statement: Cots were cleaned and sanitized daily.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-21 Evening and Overnight Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: An improvement in the quantity of equipment was observed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Approval	Compliant	
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
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	
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
5101:2-12-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care Plans	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required.
Rule	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.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication Administration and Food Supplements	Compliant	Documenting Statement: There were no 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: 5101:2-12-09 Background Check Requirements	Compliant	Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	Documenting Statement: The current licensing rules were available in a noticeable location on the premises.