

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 | Program Number | | Program Type | | |
| GLCAP Migrant and Seasonal Head Start- | 2210024168 | | Child Care Center | | |
| Fremont | | | | | |
| Address | | | County | | |
| 1499 N River Road Fremont | | | SANDUSKY | | |
| ОН | | | | | |
| 43420 | | | | | |
| | | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | | |
| 04/04/2003 | E | 243 | | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | | |
| 03/20/2024 | Level IV | | | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection S | соре | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 07/18/2024 | 8:15 AM | | 10:15 AM | |
| Reviewer: | | | | |
| KAROLINE OBERHAUS | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 4 | 0 | 0 | 4 |

| License Capacity and Enrollment at the Time of Inspection | | | | |
|---|------------------|------------|-----------|-------|
| Age Group | License Capacity | Enrollment | | |
| | Totals | Full Time | Part Time | Total |
| Infant (Birth to < 18 m) | | 4 | 0 | 4 |
| Young Toddler | | 5 | 0 | 5 |
| Total Under 2 ½ Years | 142 | 9 | 0 | 9 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 12 | 0 | 12 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 152 | 12 | 0 | 21 |

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



Department of Education Department of Job and Family Services

| Room 8 | 0 to < 12 months | 3 to 6 | |
|--------|----------------------|---------|--|
| Room 8 | 0 to < 12 months | 4 to 6 | |
| Room 7 | 3 years to < 4 years | 3 to 11 | |
| Room 7 | 3 years to < 4 years | 3 to 11 | |

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

No Moderate Risk Non-Compliances were observed during this inspection



Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: 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.

<u>Finding</u>: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number 11 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers.
- 2. Open pull cords that are not closed loop.

3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.

- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Employee(s) purse(s).
- 7. Diaper bags.
- 8. Television not securely anchored.
- 9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 10. Smoke detector needing batteries replaced.
- 11. An area rug did not have a nonskid backing.
- 12. An area rug presented a tripping hazard.
- 13. A floor surface that was unsafe in that [].
- 14. No platform was provided for the sink or toilet in the [] classroom.
- 15. The platform provided for the sink or toilet in the [] classroom was not sturdy.
- 16. The platform provided for the sink or toilet in the [] classroom posed a safety hazard in that [].
- 17. Telephone cords.
- 18. Staff member stepped over a barrier/gate while holding a child.
- 19. Emergency exits were blocked by the following classroom furniture: [].
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Other [].

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

Corrective Action Plan Due: 08/17/2024

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

<u>Code</u>: The program is required to provide fall zones around equipment to prevent injury if a child were to fall.



<u>Finding</u>: During the inspection, it was determined the fall zone under and around equipment designated for climbing, swinging, balancing and sliding did not meet the requirements as noted in number 6 below:

1. The fall surface material had not been properly distributed or raked as needed to retain proper depth under and around equipment.

2. A fall zone hazard was present, in that, the posed a risk of injury if a child were to fall from a piece of equipment.

3. The fall zone was less than 3 feet from the fence for equipment used by children 23 months of age and younger.

4. The fall zone was less than 6 feet from the fence for equipment used by children 24 months of age and older.5. There was not a fall zone of 3 feet in all directions from the perimeter of the equipment used by children 23 months of age and younger.

6. There was not a fall zone of 6 feet in all directions from the perimeter of the equipment used by children 24 months of age and older.

7. The fall zone was less than 4 1/2 feet from each piece of applicable equipment used by children 23 months of age and younger.

8. The fall zone was less than 9 feet from each piece of applicable equipment used by children 24 months of age and older.

9. Other [].

The program is required to provide adequate fall zones under and around outdoor play equipment at all times. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/17/2024

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 3 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: 05 Health & Safety

<u>Rule</u>: 5101:2-12-16 First Aid/Standard Precautions <u>Code</u>: The program is required to have a first aid kit onsite.

<u>Finding</u>: During the inspection, it was determined first aid kit(s) at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in number 6 below:

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

9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).

- 10. A working digital thermometer.
- 11. Disposable non-latex gloves.
- 12. A working flashlight.
- 13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit.

14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.

15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.

16. Soap or waterless sanitizer (field trip or transporting away from the program only).

17. Bottled water (field trip or transporting away from the program only).



Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|---|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-02 Current Information | Compliant | Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS). |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Building | Compliant | Documenting Statement: On the day of |
| Department Inspection | | the inspection, the program was operating in compliance with the current building approval(s). |
| Rule: 5101:2-12-04 Building Department Inspection | Compliant | Documenting Statement: A copy of the certificate of occupancy was available on-site for review. |
| Rule | Status | Documenting Statement(s), If applicable |



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|---|-----------|--|
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 5/3/25. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service | Compliant | Documenting Statement: The food service |
| Requirements | | license was observed posted. Following is the audit number and date of expiration: 9978032, 3-1-25. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Administrator Qualifications | Compliant | Documenting Statement: The administrator has completed the rules review course. |
| Rule | Status | Desumenting $f(x)$ if employed |
| Rule: 5101:2-12-07 Administrator | Compliant | Documenting Statement(s), If applicable Documenting Statement: Employment |
| Responsibilities/Requirements | Compliant | records for current as well as past employees were being maintained on file as required. |
| Rule: 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The administrator's hours of availability to meet with parents were posted in a noticeable location. |
| | | |
| Rule: 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The administrator's posted hours of availability reflected an appropriate schedule meeting rule compliance. |
| Rule: 5101:2-12-07 Administrator | Compliant | Documenting Statement: The current |
| Responsibilities/Requirements | | licensing rules were available in a noticeable location on the premises. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: No changes |
| Policies and Procedures | | have been made to the written policies and procedures since it was last approved by this Department. |
| | | |
| 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 Training & Whistle Blower Protection | Compliant | Documenting Statement: On the day of the inspection, all child care staff members had met orientation training requirements. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check Requirements | Compliant | Documenting Statement(s), in applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Dula | Chatwa | Decumenting Statement(a) If employed |
| Rule: 5101:2-12-10 Health Training Requirements | Status Compliant | Documenting Statement(s), If applicableDocumenting Statement: The programhad at least one Child Care Staff Memberwith currently valid training in First Aid,Management of Communicable Disease,CPR, and Child Abuse Prevention presentand readily accessible during all hours ofoperation. |
| | | |
| Rule: 5101:2-12-10 Professional Development Requirements | Status Compliant | Documenting Statement(s), If applicableDocumenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training. |
| Dula | Chatwa | Decumenting Statement(a) If emplicitly |
| Rule 5101:2-12-11 Indoor Space Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Dula | Chatwa | |
| Rule 5101:2-12-11 Separation of Children Under 2 1/2 Years | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement(s), in applicable Documenting Statement: The quarterly playground inspections were completed and documented, as required. |



| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence. |
|--|-----------|---|
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: Outdoor play was observed. |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: Drinking water is provided by means of bringing a group inside or summoning assistance. |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: Adequate bathroom access is provided during outdoor play by means of bringing a group inside or summoning assistance. |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: Shade is provided by means of awnings. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play | Compliant | Documenting Statement: The playground |
| Equipment | Compliant | safety kit was used to verify the outdoor play equipment was free from entrapment hazards and unsafe and protruding bolts. |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement: All equipment was observed to be properly placed out of the path of the main traffic pattern. |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards. |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement: All equipment in the outdoor play space was observed to be anchored and stable. |
| 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. |
| Pulo | Status | Documenting Statement(c) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |



| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: During the inspection, the equipment was observed clean and in good repair. |
|--|-----------|--|
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: Cots were cleaned and sanitized according to tule. |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: During the inspection, the cleaning and sanitation of items and toys mouthed by children were discussed. |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: On the day of the inspection, the program provided a clean environment in accordance with Appendix A of this rule, which included the furniture, materials and equipment. |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: Trash was stored appropriately and emptied daily. |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: During the inspection, it was discussed that blankets were washed according to rule. |

| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|---|
| Rule: 5101:2-12-13 Handwashing Requirements | Compliant | Documenting Statement: Children were viewed washing their hands, as required by the rule. |
| Rule: 5101:2-12-13 Handwashing Requirements | Compliant | Documenting Statement: Staff and children were observed washing hands as required by the rule. |
| Rule: 5101:2-12-13 Handwashing Requirements | Compliant | Documenting Statement: It was discussed with the staff that hand washing shall occur upon arrival to the program. |

| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|--|
| 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 | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Toothbrushing | Compliant | Documenting Statement: Tooth brushing |
| Requirements | | is practiced by the program and it was |



|--|

| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|--|
| Rule: 5101:2-12-14 Transportation and Field Trip Procedures | Compliant | Documenting Statement: Requirements regarding routine and/or field trips were discussed during the inspection. |
| Rule: 5101:2-12-14 Transportation and Field Trip Procedures | Compliant | Documenting Statement: The driver(s) had current and valid training in first aid, management of communicable disease, and CPR. |
| Rule: 5101:2-12-14 Transportation and Field Trip Procedures | Compliant | Documenting Statement: The form(s) used by the program for routine and/or field trips were verified to meet the requirements of the rule. |

| 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 |
|-------------------------------------|-----------|--|
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: The vehicle(s) |
| Vehicle Requirements | | used by the program to transport children are inspected and licensed by the Ohio State Highway Patrol. |

| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|--|
| Rule: 5101:2-12-15 Child Medical and Enrollment Records | Compliant | Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule. |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records | Compliant | Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule. |

| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------|-----------------------|---|
| Rule: 5101:2-12-15 Medica | al/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. |
|--|---|
| | |

| 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. |
| | | |

| Rule | Status | Documenting Statement(s), If applicable |
|-------------------------------------|-----------|---|
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. |

| 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: 5101:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement: During the inspection the requirements regarding the isolation of a child suspected of having a communicable disease were discussed, but not observed. |
| Rule: 5101:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement: The program staff stated parents were informed when their child had any exposure to a contagious illness by number 1 below: 1. A posted notice; 2. Verbal communication; 3. A written notice sent home; 4. A note posted on the classroom door; 5. Other []. |

| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-----------|---|
| Rule: 5101:2-12-16 Incident/Injury | Compliant | Documenting Statement: The JFS 01299 |
| Reporting | | "Incident/Injury Report For Child Care" |
| | | forms reviewed during this inspection |
| | | were complete as required. |
| | | |



| Rule: 5101:2-12-16 Incident/Injury | Compliant | Documenting Statement: The |
|-------------------------------------|-----------|--|
| Reporting | | requirements for completing JFS 01299 |
| | | "Incident/Injury Report For Child Care" |
| | | reports were discussed during the |
| | | inspection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules were observed posted. |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: During the |
| | | inspection, developmentally-appropriate |
| | | practices were observed in the |
| | | classroom(s). |
| | | |
| 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. |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 License Capacity | Compliant | Documenting Statement: The program |
| | | was operating within their license |
| | | capacity limits. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: During the |
| | | inspection, enough Child Care Staff |
| | | Members were employed to meet the |
| | | staff/child ratios. |
| 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: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | | ratios observed during the inspection |
| | | were in compliance. |
| | | |
| | | |



Rule

Status

| 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. |
| | | |
| | | I |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance | Compliant | Documenting Statement: During the |
| Records | | inspection, attendance records were |
| | | reviewed. Child Care Staff Members were |
| | | viewed recording the attendance for each |
| | | child upon arrival and departure. All |
| | | |
| | | attendance records met the requirements |
| | | of the rule and were kept with the group |
| | | at all times. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: During the |
| | | inspection, child care staff were observed |
| | | meeting the basic needs of all children |
| | | assigned to the group. |
| | | assigned to the group. |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff |
| · | | Members were supervising the children |
| | | and were able to intervene as needed. |
| | | and were able to intervene as needed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Child Guidance | Compliant | Documenting Statement: Appropriate |
| | | child guidance techniques and practices |
| | | were observed being used during the |
| | | inspection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Staff reported |
| | Compliant | |
| | | that the rest area had adequate lighting, |
| | | which allowed for the visual supervision |
| | | |
| | | of children. |
| Rule: 5101:2-12-20 Cots and Nanning | Compliant | |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Staff reported |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Staff reported that cots were placed appropriately and |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Staff reported |
| Rule: 5101:2-12-20 Cots and Napping Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Staff reported that cots were placed appropriately and safely during nap time. |
| | | Documenting Statement: Staff reported that cots were placed appropriately and safely during nap time. Documenting Statement: Staff reported |
| | | Documenting Statement: Staff reported that cots were placed appropriately and safely during nap time. |

Documenting Statement(s), If applicable



| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|--|
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were placed 2 feet apart. |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were labeled with the assigned infant's name. |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-22 Meal and Snack | | |
| Requirements | Compliant | Documenting Statement: Posted menus included foods from all four food groups. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Posted menus were current and dated. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Meals served at the program included foods from the four food groups in sufficient amounts. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: The food served at meal time to the infants and toddlers was developmentally appropriate and did not pose a choking hazard. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: The menu posted reflected the meal served. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: The menu was posted. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Snacks served at the program included foods from two of the four food groups and provided nutritional value in addition to calories. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Snacks were provided at intervals as required by this rule. |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Meals were provided at intervals as required by this rule. |



| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|--|
| Rule: 5101:2-12-22 Safe Food Handling/Storage | Compliant | Documenting Statement: Food was stored in a safe and sanitary manner. |
| Rule: 5101:2-12-22 Safe Food Handling/Storage | Compliant | Documenting Statement: All eating utensils were developmentally appropriate. |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|--|
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: Appropriate daily written records for all infants were viewed. |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: An appropriate program of activities with infants was observed. |

| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|---|
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: Infants were fed in conformity with parent/guardian's written, dated instructions. |
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: All bottles were labeled as required. |
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: The program staff followed all required procedures for infant formula, food preparation and food service. |

| Rule | Status | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: During the |
| Toilet Training | | inspection, there was discussion |
| | | concerning diapering routines. Child-care |
| | | staff indicated diapers were changed at |
| | | appropriate intervals throughout the day. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|--|
| Rule: 5101:2-12-25 Medication Administration | Compliant | Documenting Statement: The program had complete written documentation for administering medication or food supplements. |
| Rule | Status | Documenting Statement(s), If applicable |



| Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant | Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program. |
|--|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Written Disaster Plan | Compliant | Documenting Statement: Annual training of the written disaster plan was completed by staff. |
| Rule: 5101:2-12-16 Written Disaster Plan | Compliant | Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements. |
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