



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 Caterpillars to butterflies superior | Program Number 2210024673 | Program Type Child Care Center | |
| Address 10933 superior Cleveland OH 44106 | | County CUYAHOGA | |
| Building Approval Date 05/27/2021 | Use Group/Code E | Occupancy Limit 45 | Maximum Under 2 ½ 17 |
| Fire Inspection Approval Date 06/24/2021 | Food Service Risk Level Level III | | |

| Inspection Information | | |
|-------------------------------|-----------------------------|----------------------------------|
| Inspection Type Monitor | Inspection Scope Partial | Inspection Notice Unannounced |
| Inspection Date 04/25/2022 | Begin Time 4:30 PM | End Time 8:00 PM |
| Reviewer: DIANE TRACZYK | | |

| Summary of Findings | | | | |
|--------------------------|--------------------------------------|-----------------------|------------------------|--------------------|
| No. Rules Verified 28 | 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) | | 6 | 0 | 6 |
| Young Toddler | | 7 | 0 | 7 |
| Total Under 2 ½ Years | 17 | 13 | 0 | 13 |
| Older Toddler | | 9 | 0 | 9 |
| Preschool | | 19 | 0 | 19 |
| School Age | | 0 | 34 | 34 |
| Total Capacity/Enrollment | 40 | 28 | 34 | 75 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Infant | 0 to < 12 months | 1 to 5 | 1st |



| | | | |
|------------|--------------------------|--------|-----|
| Toddler | 18 months to < 30 months | 1 to 8 | 1st |
| Toddler | 18 months to < 30 months | 1 to 7 | 2nd |
| Preschool | 3 years to < 4 years | 1 to 5 | 2nd |
| School Age | School-Age to < 11 years | 1 to 5 | 2nd |

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: 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.

Finding: During the inspection, a ratio of 1 child care staff member for 8 children was determined to have occurred for the toddler group when the situation in number 3 below occurred:

1. A child care staff member stepped out of the room.
2. A child care staff member had not arrived at work on time.
3. Children were present who were not scheduled to be there.
4. A child care staff member was unable to work.
5. A child was injured in that group.
6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
9. Ratio was doubled for more than two hours while children were napping.
10. Ratio was doubled while children were napping for a group that included at least one infant.



11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other [].

Additional child care 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: 05/27/2022

Domain: 08 Staff Files

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

Code: The program is required to have all staff request background checks as required.

Finding: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in numbers 1 & 2 below:

1. Submitting the request for a background check for child care in the OPR.
2. Submitting fingerprints electronically according to the process established by BCI.

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

Corrective Action Plan Due: 05/27/2022

Domain: 08 Staff Files

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

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Finding: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the infant group and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan,



which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2022

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-03 Inspection Requirements

Code: The program is required to respond to noncompliances by the date noted in the inspection report.

Finding: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 2/16/22. The rule requires the program to complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number 1 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.



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

Corrective Action Plan Due: 05/27/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

Finding: During the inspection, it was determined that the attendance records did not include the required information listed in numbers 1, 2 & 5 below:

1. The full name of the child.
2. The birth date of the child.
3. The assigned group.
4. The child's weekly schedule.
5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 05/27/2022

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 3 below, as required in rule.

1. Upon arrival.
2. Prior to departure.
3. After toileting/diaper change.
4. After contact with bodily fluids.
5. After returning from outdoor play.
6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.



7. Before eating or assisting with food preparation.
8. After water activities.
9. When visibly soiled (must use soap and water)
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: 05/27/2022

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 which may threaten their health, safety, or well-being as noted in number 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.
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. Other: Plastic wall covering falling off on SA coat rack and SA gate.

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: 05/27/2022

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 2 below:

1. The straps were missing on the [].
2. The straps were attached, but were not used on the infant changing table.
3. The straps were attached and were used, but were not used in a safe manner.
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: 05/27/2022

Domain: 02 Safe & Sanitary Environment

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

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

Finding: During the inspection, it was determined that unsanitary conditions, as noted in number 3, 5, 9 below, were in the staff restroom:

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

The restroom(s) must be kept sanitary at all times. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 05/27/2022



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 5 below, as required in rule.

1. Upon arrival for the day.
2. Prior to departure.
3. Upon entry into a classroom.
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: 05/27/2022

Domain: 03 Postings & Equipment

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

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

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

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



8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 05/27/2022

Domain: 04 Indoor/Outdoor Space

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

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

Finding: During the inspection, it was determined that hazardous conditions existed in the outdoor play area, as noted in number 10 below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.
6. There were thistles with pricklers.
7. There were bird droppings.
8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
9. The sandbox was contaminated.
10. Other: Guard rail with rust exposed/accessible.

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

Corrective Action Plan Due: 05/27/2022

Domain: 04 Indoor/Outdoor Space

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

Code: The program is required to conduct and document quarterly inspections of their outdoor play space.

Finding: During the inspection, it was determined that quarterly inspections of one or more outdoor play area and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 05/27/2022

Domain: 04 Indoor/Outdoor Space

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

Code: The program is required to have an outdoor play space free from debris.

Finding: During the inspection, it was determined that the outdoor area was littered with debris. 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: 05/27/2022

Domain: 05 Health & Safety

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

Code: The program is required to obtain written documentation when serving substitutions for fluid milk.

Finding: 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.

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: 05/27/2022



Domain: 05 Health & Safety

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

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

Finding: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 1 below.

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

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 05/27/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Daily Care

Code: The program staff is required to refrain from placing an infant in a crib with a bottle.

Finding: During the inspection, it was determined that an infant was placed in a crib with a bottle. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to provide mattresses that are in good condition.

Finding: During the inspection, it was determined that at least one crib mattress cover did not meet the requirements of the rule as noted in number 3 below:



1. The mattress cover was not waterproof.
2. The mattress cover was torn.
3. Other: no mattress cover was being used.

Discontinue the use of and replace immediately any mattress which has a cover that does not meet the specified requirements in the rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

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

Finding: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in numbers 3 & 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: 05/27/2022



Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2022

Domain: 08 Staff Files

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

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

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 2, 5, 6 & 7 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: 05/27/2022



Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2022

Domain: 08 Staff Files

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

Code: The program is required to have staff complete the online staff orientation training before they are permitted to have sole responsibility of children.

Finding: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2022

Domain: 09 Children's Files

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

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

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 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: 05/27/2022

Domain: 09 Children's Files

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

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

Finding: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 1, 4, 6, 7, 10, 12, 13, 15 below.

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other []



Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 05/27/2022

Domain: 09 Children's Files

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

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

Finding: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number 4, 6, 7, 10, 13 & 15 below.

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other []

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 05/27/2022



Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|--|--------------|---|
| 5101:2-12-02 License Posted | Not Verified | |
| 5101:2-12-02 Current Information | Not Verified | |
| 5101:2-12-04 Building Department Inspection | Not Verified | |
| 5101:2-12-04 Fire Inspection | Not Verified | |
| 5101:2-12-04 Food Service Requirements | Not Verified | |
| 5101:2-12-05 Denial, Revocation and Suspension | Not Verified | |
| 5101:2-12-07 Administrator Qualifications | Not Verified | |
| 5101:2-12-07 Written Program Policies and Procedures | Not Verified | |
| 5101:2-12-10 Health Training Requirements | Not Verified | |
| 5101:2-12-10 Professional Development Requirements | Not Verified | |
| 5101:2-12-11 Indoor Space Requirements | Not Verified | |



| Rule | Status | Documenting Statement(s), If applicable |
|---|--------------|---|
| 5101:2-12-11 Separation of Children Under 2 1/2 Years | Compliant | |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
| 5101:2-12-13 Smoke Free Environment | Not Verified | |
| 5101:2-12-13 Toothbrushing Requirements | Not Verified | |
| 5101:2-12-14 Transportation and Field Trip Procedures | Not Verified | |
| 5101:2-12-14 Transportation - Driver Requirements | Not Verified | |
| 5101:2-12-14 Transportation - Vehicle Requirements | Not Verified | |
| 5101:2-12-15 Medical/Physical Care Plans | Not Verified | |
| 5101:2-12-16 Emergency Drills | Compliant | |
| 5101:2-12-16 First Aid/Standard Precautions | Not Verified | |
| 5101:2-12-16 Management of Communicable Disease | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |



| | | |
|---|---------------|--|
| 5101:2-12-16 Incident/Injury Reporting | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and Equipment | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Not Verified | |
| 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 Supervision | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-21 Evening and Overnight Care | Compliant | Documenting Statement: During the inspection, rule requirements pertaining to evening and overnight care were discussed, and observed. The discussion included the requirements for the program's security plan, the schedule of activities, the sleeping arrangements if applicable, and the other hygiene stipulations outlined in the rule. |



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|---|--------------|---|
| Rule: 5101:2-12-21 Evening and Overnight Care | Compliant | Documenting Statement: At the time of the inspection, adequate indoor and outdoor lighting was provided during evening hours. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food Handling/Storage | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food Preparation | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet Training | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-24 Swimming and Water Safety Requirements | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication Administration | Not Verified | |