

# **Center Licensing Inspection Full Report**

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

|                               | Program Deta            | ils             |                   |  |
|-------------------------------|-------------------------|-----------------|-------------------|--|
| Program Name                  | Program Number          |                 | Program Type      |  |
| JRC Learning Center - Parkway | 2210025281              |                 | Child Care Center |  |
|                               |                         |                 |                   |  |
| Address                       |                         |                 | County            |  |
| 3300 Parkway St NW Canton     |                         |                 | STARK             |  |
| ОН                            |                         |                 |                   |  |
| 44708                         |                         |                 |                   |  |
|                               |                         |                 |                   |  |
| Building Approval Date        | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |  |
| 07/01/2021                    | I-4                     | 56              |                   |  |
| Fire Inspection Approval Date | Food Service Risk Level |                 |                   |  |
| 10/03/2024                    | Level IV                |                 |                   |  |

| Inspection Information |                                |                  |                   |              |  |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type        | Inspection So                  | cope             | Inspection Notice |              |  |
| Annual                 | Full                           |                  | Unannounced       |              |  |
| Inspection Date        | Inspection Date Begin Time     |                  | End Time          |              |  |
| 12/10/2024             | 2024 10:00 AM 4:00 PM          |                  |                   |              |  |
| Reviewer:              |                                |                  |                   |              |  |
| TONYA WASHINGTON       |                                |                  |                   |              |  |
| Cummons of Findings    |                                |                  |                   |              |  |
| Summary of Findings    |                                |                  |                   |              |  |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 58                     | 5                              | 0                | 1                 | 5            |  |

| 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)                                 |                  | 16         | 0         | 16    |  |
| Young Toddler   |                  | 15         | 0         | 15    |  |
| Total Under 2 ½ Years                                     | 56               | 31         | 0         | 31    |  |
| Older Toddler   |                  | 9          | 0         | 9     |  |
| Preschool   |                  | 43         | 0         | 43    |  |
| School Age  |                  | 0          | 0         | 0     |  |
| Total Capacity/Enrollment                                 | 116              | 52         | 0         | 83    |  |

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



| INFANT 1    | 0 to < 12 months         | 2 to 6  | tummy time        |
|-------------|--------------------------|---------|-------------------|
| INFANT 1    | 0 to < 12 months         | 2 to 6  | diaper change     |
| INFANT 2    | 12 months to < 18 months | 2 to 5  | lunch             |
| INFANT 2    | 12 months to < 18 months | 2 to 5  | indoor buggy ride |
| INFANT 2    | 12 months to < 18 months | 2 to 5  | nap               |
| TODDLER 1   | 18 months to < 30 months | 1 to 6  | nap               |
| TODDLER 1   | 18 months to < 30 months | 1 to 6  | fun time          |
| TODDLER 1   | 18 months to < 30 months | 1 to 6  | lunch             |
| TODDLER 2   | 18 months to < 30 months | 2 to 6  | gym time          |
| TODDLER 2   | 18 months to < 30 months | 2 to 6  | lunch             |
| TODDLER 2   | 18 months to < 30 months | 2 to 6  | nap               |
| TODDLER 3   | 18 months to < 30 months | 2 to 7  | gym time          |
| TODDLER 3   | 18 months to < 30 months | 2 to 7  | lunch             |
| TODDLER 3   | 18 months to < 30 months | 2 to 7  | nap               |
| PRESCHOOL 1 | 3 years to < 4 years     | 2 to 16 | lunch             |
| PRESCHOOL 1 | 3 years to < 4 years     | 2 to 16 | free play         |
| PRESCHOOL 1 | 3 years to < 4 years     | 2 to 16 | nap               |
| PRE K 1     | 4 years to < 5 years     | 2 to 11 | nap               |
| PRE K 1     | 3 years to < 4 years     | 2 to 11 | lunch             |
| PRE K 1     | 4 years to < 5 years     | 2 to 11 | free play         |
| PRE K 2     | 4 years to < 5 years     | 2 to 11 | lunch             |
| PRE K 2     | 4 years to < 5 years     | 2 to 11 | free play         |
| PRE K 2     | 4 years to < 5 years     | 2 to 11 | nap               |

## **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   |  |  |  |
|--|--|--|--|
| Serious hisk item compliances  |  |  |  |
| No Serious Risk Non-Compliances were observed during this inspection |  |  |  |
|  |  |  |  |
|  |  |  |  |
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## **Moderate Risk Non-Compliances**

Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans

<u>Code</u>: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

<u>Finding</u>: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in numbers 1,32,33,34,35,36,37 below:

1. No plan was on file.

(Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.
- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete. (Page 2)
- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

(Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s)of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.



- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing. (Page 4)
- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/10/2025

### Low Risk Non-Compliances

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

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

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

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number 3 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: 01/10/2025

#### Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

<u>Code</u>: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in numbers 4,5,6 below:

- 1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
- 2. First aid training was not completed within ninety days of hire.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
- 4. The child abuse and neglect recognition and prevention training was expired.
- 5. The first aid training was expired.
- 6. The CPR training was expired.

Refer to the Employee Record Chart for the name of the child care staff member who must complete the required health and safety trainings. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/10/2025



## 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".

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 4,6,10,14 below.

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

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

#### 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.

<u>Finding</u>: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in numbers 1,2 below:

- 1. No medical was on file for at least one child
- 2. Medicals 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: 01/10/2025

#### Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to remove all medication, medical foods and topical products that are no longer being administered or have expired. The program is also required to maintain current documentation to administer medications, medical foods and topical products.

<u>Finding</u>: During the inspection, it was determined that medication, medical foods and/or topical products did not meet the requirement for administering medication, medical foods, and/or medical products as noted in number 2 below:

- 1. The medication, medical food, or topical product was no longer needed and had not been removed from the program.
- 2. The medication, medical food, or topical product had expired and had not been removed from the program.
- 3. The prescription label had expired.

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

Corrective Action Plan Due: 01/10/2025



## 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                                  |
| Naic. 5101.2 12 02 Electise i Osted   | Compilant | in a location visible to parents as                                     |
|   |           | required.   |
|   |           | required.   |
|   | L         |   |
| Rule  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-02 Current  | Compliant | Documenting Statement: The program                                      |
| Information   |           | 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  |           |   |
| no.i  | C+-+      | Decree setion Chateres set a) If a selicular                            |
| Rule  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-04 Building   | Compliant | Documenting Statement: A copy of the                                    |
| Department Inspection   |           | certificate of occupancy dated 7.1.21 was available on-site for review. |
|   |           | available on-site for review.   |
| Rule: 5101:2-12-04 Building   | Compliant | Documenting Statement: On the day of                                    |
| Department Inspection   |           | the inspection, the program was   |
| Decree Processes and the Control of |           | operating in compliance with the current                                |
|   |           | building approval.  |
|   |           |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable                                 |
| 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 10.2.2025.                                       |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable                                 |
| nuic  | Julius    | Documenting Statement(s), if applicable                                 |



| Rule: 5101:2-12-04 Food Service<br>Requirements | Compliant | Documenting Statement: The food service license Level 4 was observed posted. |
|---|-----------|--|
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-07 Administrator                | Compliant | Documenting Statement: The   |
| Qualifications                                  |           | administrators completed the rules   |
|   |           | review course in January and February  |
|   |           | 2023.  |
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-07 Written Program              | Compliant | Documenting Statement: The written   |
| Policies and Procedures                         |           | policies and procedures were not   |
|   |           | reviewed on the day of the inspection,                                       |
|   |           | review will take place next fiscal year.                                     |
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-08 Medical Statement            | Compliant | Documenting Statement: All employees   |
|   | '         | had current medical statements on file.                                      |
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-08 Orientation                  | Compliant | Documenting Statement: On the day of   |
| Training & Whistle Blower Protection            | Compilant | the inspection, all child care staff   |
| Training & Whistic Blower Protection            |           | members had met orientation training   |
|   |           | requirements.  |
|   |           | requirements.  |
|   | I         |  |
| Rule  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-09 Background Check             | Compliant | Documenting Statement: During the  |
| Requirements                                    |           | inspection, the required documentation                                       |
|   |           | regarding background checks was on file                                      |
|   |           | for all employees listed.  |
|   | _         |  |
| Rule  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-10 Professional                 | Compliant | Documenting Statement: At the time of  |
| Development Requirements                        |           | the inspection, all child care staff   |
|   |           | members had completed the required   |
|   |           | amount of professional development   |
|   |           | training.  |
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable                                      |
| 5101:2-12-11 Indoor Space                       | Compliant |  |
| Requirements                                    | Compliant |  |
| . regarierres                                   | <u>I</u>  |  |



| Rule   | Status   | Documenting Statement(s), If applicable    |
|--|--|--|
| 5101:2-12-11 Separation of Children  | Compliant  |  |
| Under 2 1/2 Years  |  |  |
|  |  |  |
| Rule   | Status   | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-11 Outdoor Space   | Compliant  | Documenting Statement: The outdoor         |
| Requirements   |  | play area is separated from traffic and    |
|  |  | other hazards by a fence.                  |
| Rule: 5101:2-12-11 Outdoor Space   | Compliant  | Documenting Statement: The quarterly       |
| Requirements   | Compliant  | playground inspections were completed      |
| Requirements   |  | and documented, as required. The most      |
|  |  | recent inspection report form was dated    |
|  |  | 5/30/24, 9/11/24.                          |
|  |  | 5/30/24, 9/11/24.                          |
| Rule: 5101:2-12-11 Outdoor Space   | Compliant  | Documenting Statement: The outdoor         |
| Requirements   | The second secon | play space was not viewed or inspected     |
| Contribution II and the contribution of the co |  | during this inspection due to rain during  |
|  |  | the inspection.                            |
|  |  | •  |
|  |  |  |
| Rule   | Status   | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-11 Outdoor Play  | Compliant  | Documenting Statement: The outdoor         |
| Equipment  |  | play space and equipment were not          |
|  |  | viewed during this inspection due to rain; |
|  |  | muddy conditions; however, the             |
|  |  | requirements were discussed.               |
|  |  |  |
| Rule   | Status   | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-11 Outdoor Play Fall   | Compliant  | Documenting Statement: The protective      |
| Zones  | ,  | surfaces under the outdoor equipment       |
|  |  | were not viewed during this inspection     |
|  |  | due to rain; muddy conditions; however,    |
|  |  | the requirements were discussed.           |
|  |  |  |
| Pode   | Chahira  | Described States and A. M. and the L.      |
| 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.          |
|  |  |  |
| Rule   | Status   | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-12 Safe Environment  | Compliant  | Documenting Statement: Cleaning            |
|  |  | supplies were viewed stored out of the     |
|  |  | reach of children.                         |
|  |  |  |
|  |  | reach of children.                         |



| ~   |                                  |   |
|---|----------------------------------|---|
| Rule: 5101:2-12-12 Safe Environment   | Compliant                        | Documenting Statement: All electrical outlets were covered with safety receptacles.   |
| Rule: 5101:2-12-12 Safe Environment   | Compliant                        | Documenting Statement: All area rugs had nonskid backing.   |
| Rule: 5101:2-12-12 Safe Environment   | Compliant                        | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being.   |
| Rule: 5101:2-12-12 Safe Environment   | Compliant                        | Documenting Statement: The indoor temperature of the program during the inspection was comfortable and met rule compliance.   |
| 2.  |                                  |   |
| Rule  | Status                           | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Sanitary   | Compliant                        | Documenting Statement: On the day of  |
| Equipment and Environment   |                                  | 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   | Compliant                        | Documenting Statement: During the   |
| Equipment and Environment   | Construction of Providendations. | inspection, the equipment was observed  |
|   |                                  | clean and in good repair.   |
|   | Į:                               |   |
| Rule  | Status                           | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Handwashing  | Compliant                        | Documenting Statement: Staff and  |
| Requirements  |                                  | children were observed washing hands as   |
|   |                                  | required by the rule.   |
|   | •                                | <u></u>   |
|   |                                  |   |
| Rule  | Status                           | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Smoke Free   | Status<br>Compliant              | Documenting Statement: A notice was   |
|   |                                  | Documenting Statement: A notice was observed posted stating that smoking is   |
| Rule: 5101:2-12-13 Smoke Free   |                                  | Documenting Statement: A notice was   |
| Rule: 5101:2-12-13 Smoke Free<br>Environment  | Compliant                        | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.  |
| Rule: 5101:2-12-13 Smoke Free<br>Environment<br>Rule                                  | Compliant                        | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.  Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Smoke Free Environment  Rule Rule: 5101:2-12-14 Transportation and | Compliant                        | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.  Documenting Statement(s), If applicable Documenting Statement: The drivers had  |
| Rule: 5101:2-12-13 Smoke Free<br>Environment<br>Rule                                  | Compliant                        | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.  Documenting Statement(s), If applicable Documenting Statement: The drivers had current and valid training in first aid, |
| Rule: 5101:2-12-13 Smoke Free Environment  Rule Rule: 5101:2-12-14 Transportation and | Compliant                        | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.  Documenting Statement(s), If applicable Documenting Statement: The drivers had  |



| Rule: 5101:2-12-14 Transportation and  | Compliant  | Documenting Statement: The program   |
|--|--|--|
| Field Trip Procedures  |  | uses the ODJFS sample trip permission  |
|  |  | form for field trips to secure written   |
|  |  | permission from parents or guardians.  |
|  |  | permission from parents of guardians.  |
|  |  |  |
| Rule   | Status   | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-14 Transportation -  | Compliant  | Documenting Statement: The drivers had   |
| 1.0  | Compilant  | 1777 at 1777 a |
| Driver Requirements  |  | completed the required ODJFS driver  |
|  |  | training.  |
|  |  |  |
| Rule   | Status   | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-14 Transportation -  | Compliant  | Documenting Statement: The vehicle   |
| Vehicle Requirements   | Compilation  | used by the program to transport children  |
| vernote requirements   |  | was inspected and licensed by the Ohio   |
|  |  |  |
|  |  | State Highway Patrol on 5/1/2024.  |
| Rule: 5101:2-12-14 Transportation -  | Compliant  | Documenting Statement: During the  |
| 3-3  | Compilant  |  |
| Vehicle Requirements   |  | inspection, weekly safety inspections  |
|  |  | and/or monthly emergency exiting drills  |
|  |  | were completed and documented, as  |
|  |  | required using the ODJFS sample form.  |
|  |  |  |
|  | <b>7 1 2 1 3 1 1 3 1 1 1 1 1 1 1 1 1 1</b> |  |
| 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  |
| T. Control of the Con | 1  |  |
|  |  | nosted in the program as required  |
|  |  | posted in the program as required.   |
|  |  | posted in the program as required.   |
| Rule   | Status   | Documenting Statement(s), If applicable  |
| Rule Rule: 5101:2-12-16 Emergency Drills   | Status<br>Compliant  | Documenting Statement(s), If applicable  Documenting Statement: Documentation  |
|  | 20 000   | Documenting Statement(s), If applicable  |
|  | 20 000   | Documenting Statement(s), If applicable  Documenting Statement: Documentation  |
|  | 20 000   | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified  |
|  | 20 000   | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and   |
|  | 20 000   | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified  |
| Rule: 5101:2-12-16 Emergency Drills  Rule  | Compliant  | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills  Rule  Rule  Rule: 5101:2-12-16 First Aid/Standard   | Compliant  | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable Documenting Statement: During the   |
| Rule: 5101:2-12-16 Emergency Drills  Rule  | Compliant  | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills  Rule  Rule  Rule: 5101:2-12-16 First Aid/Standard   | Compliant  | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable Documenting Statement: During the   |
| Rule: 5101:2-12-16 Emergency Drills  Rule  Rule  Rule: 5101:2-12-16 First Aid/Standard   | Compliant  | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the program had complete   |
| Rule: 5101:2-12-16 Emergency Drills  Rule Rule: 5101:2-12-16 First Aid/Standard Precautions  | Status Compliant   | Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required.   |
| Rule: 5101:2-12-16 Emergency Drills  Rule Rule: 5101:2-12-16 First Aid/Standard Precautions  Rule  | Status Compliant Status Status   | Documenting Statement(s), If applicable  Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the program had complete first aid kits available as required.  Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Emergency Drills  Rule Rule: 5101:2-12-16 First Aid/Standard Precautions  | Status Compliant   | Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required.   |



|   |                     | posted and was readily available to staff and parents.  |
|---|---------------------|---|
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Incident/Injury<br>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: 5101:2-12-17 Daily Schedule               | Compliant           | Documenting Statement: Daily schedules were observed posted.  |
| Dollar  | Chathar             | December Chatemant (a) If and I all a   |
| Rule: 5101:2-12-17 Materials and Equipment      | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: During the inspection, children had access to additional equipment in the classrooms.       |
| Rule: 5101:2-12-17 Materials and Equipment      | Compliant           | Documenting Statement: Sufficient equipment was observed in all categories.   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Outdoor Play                 | Compliant           |   |
| Rule  | Status              | Desumenting Statement(s) If applicable  |
| Rule: 5101:2-12-18 License Capacity             | Compliant           | Documenting Statement(s), If applicable  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: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required. |
| Rule: 5101:2-12-18 Ratio                        | Compliant           | Documenting Statement: Staff/child ratios observed during the inspection were in compliance.  |
| Rule  | Status              | Documenting Statement(s), If applicable   |



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| 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 Attendance<br>Records | Compliant | Documenting Statement: Child Care Staff Members were observed recording the attendance for each child upon arrival and documenting each child's departure.  |
| Rule: 5101:2-12-18 Attendance<br>Records | Compliant | Documenting Statement: During the 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. |
| Dule                                     | Chatus    | Decumenting Statements of the mulinable   |
| 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.   |
| Rule: 5101:2-12-19 Supervision           | Compliant | Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.   |
| Rule: 5101:2-12-19 Supervision           | Compliant | Documenting Statement: During the inspection, child care staff were observed assisting children throughout the day.   |
| n I                                      | C.        |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Child Guidance              | Compliant |   |
|  |           |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-20 Cots and Napping      | Compliant | Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children.   |
| Rule: 5101:2-12-20 Cots and Napping      | Compliant | Documenting Statement: Cots were placed appropriately and safely during nap time.   |



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| Rule: 5101:2-12-20 Cots and Napping  | Compliant                        | Documenting Statement: The cots and  |
|  |                                  | cribs were disinfected daily.  |
|  |                                  |  |
| Rule   | Status                           | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-20 Cribs   | Compliant                        | Documenting Statement: All cribs were  |
|  |                                  | placed 2 feet apart.   |
|  |                                  | Table 1   Tabl |
| Rule: 5101:2-12-20 Cribs   | Compliant                        | Documenting Statement: Cribs were  |
|  | 1000 x 10000010 ■ 30000000000111 | separated from the play space by a safe  |
|  |                                  | and sturdy and physical barrier.   |
|  |                                  |  |
| Rule: 5101:2-12-20 Cribs   | Compliant                        | Documenting Statement: All cribs were  |
|  |                                  | labeled with the assigned infant's name.   |
|  |                                  |  |
| Rule   | Status                           | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: Posted menus  |
| Requirements   |                                  | included foods from all four food groups.  |
| Sergotation (Material Confederation Sergotation Sergot |                                  |  |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: Posted menus  |
| Requirements   |                                  | were current and dated.  |
|  |                                  |  |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: Meals served at   |
| Requirements   |                                  | the program included foods from the four   |
|  |                                  | food groups in sufficient amounts.   |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: Meals were  |
| Requirements   | Compliant                        | provided at intervals as required by this  |
| Requirements   |                                  | rule.  |
|  |                                  | , and  |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: The menu was  |
| Requirements   |                                  | posted.  |
| 90   | e                                | "  |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: The menu  |
| Requirements   |                                  | posted reflected the meal served.  |
| P. I F101 2 12 22 M. I I.C I.  |                                  | D  |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: Snacks served at  |
| Requirements   |                                  | the program included foods from two of   |
|  |                                  | the four food groups and provided nutritional value in addition to calories.   |
|  |                                  | nutritional value in addition to calories.   |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: Snacks were   |
| Requirements   | 22                               | provided at intervals as required by this  |
| nequilents   |                                  | rule.  |
|  |                                  |  |
| Rule: 5101:2-12-22 Meal and Snack  | Compliant                        | Documenting Statement: Substituted   |
| Requirements   |                                  | foods served were recorded on the  |
|  |                                  | posted menu, as required by this rule.   |



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| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-22 Fluid Milk        | Compliant | Documenting Statement: All                |
| Requirements                         |           | infants/toddlers were served              |
|                                      |           | formula/milk in sufficient amounts to     |
|                                      |           | meet the nutritional requirements.        |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-22 Safe Food         | Compliant | Documenting Statement: Food was stored    |
| Handling/Storage                     | *         | in a safe and sanitary manner.            |
|                                      |           |   |
| Rule: 5101:2-12-22 Safe Food         | Compliant | Documenting Statement: All eating         |
| Handling/Storage                     |           | utensils were developmentally             |
|                                      |           | appropriate.                              |
|                                      |           |   |
|                                      | _         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-23 Infant Daily Care       | Compliant |   |
|                                      | , ,       |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were   |
| Food Preparation                     |           | warmed in accordance with the rule in a   |
|                                      |           | bottle warmer.                            |
|                                      |           |   |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: Bottles and        |
| Food Preparation                     |           | opened food were stored in a refrigerator |
|                                      |           | located in the infant room.               |
|                                      |           |   |
|                                      | _         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-23 Diapering and     | Compliant | Documenting Statement: Appropriate        |
| Toilet Training                      |           | diaper changing procedures were           |
|                                      |           | observed during the inspection in the     |
|                                      |           | infant room.                              |
|                                      |           |   |
| ,                                    | -         | 1   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-08 Child Care Staff  | Compliant | Documenting Statement: All Child Care     |
| Member Educational Requirements      | ,         | Staff Members had verification of         |
|                                      |           | educational requirements on file at the   |
|                                      |           | program.                                  |
|                                      |           | F. 30 a                                   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
|                                      |           |   |



| Rule: 5101:2-12-16 Written Disaster<br>Plan | Compliant | Documenting Statement: Annual training of the written disaster plan was completed by staff.                                  |
|---|-----------|--|
| Rule: 5101:2-12-16 Written Disaster<br>Plan | Compliant | Documenting Statement: No changes have been made to the written disaster plan since it was last approved by this Department. |