



## 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 Blossom Trail - Kids Care Learning World	Program Number 2220025582	Program Type Child Care Center	
Address 8594 Sancus Blvd Columbus OH 43240		County FRANKLIN	
Building Approval Date 01/11/2022	Use Group/Code E	Occupancy Limit 100	Maximum Under 2 ½ 38
Fire Inspection Approval Date 01/19/2022	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 07/01/2022	Begin Time 3:00 PM	End Time 3:45 PM
Inspection Date 07/01/2022	Begin Time 8:45 AM	End Time 2:10 PM
Reviewer: SARENA POWHIDA		
Reviewer: SARENA POWHIDA		

Summary of Findings				
No. Rules Verified 57	No. Rules with Non-compliances 17	No. Serious Risk 0	No. Moderate Risk 4	No. Low Risk 25

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		5	0	5
<b>Total Under 2 ½ Years</b>	37	11	0	11
Older Toddler		5	0	5
Preschool		17	0	17
School Age		0	0	0



<b>Total Capacity/Enrollment</b>	58	22	0	33
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<b>Staff-Child Ratios at the Time of Inspection</b>			
<b>Group</b>	<b>Age Group/Range</b>	<b>Ratio Observed</b>	<b>Comment</b>
Marigolds	30 months to < 36 months	1 to 5	
Marigolds	30 months to < 36 months	1 to 6	Naptime
Tulips 1	0 to < 12 months	1 to 2	
Tulips 1	0 to < 12 months	1 to 2	
Tulips 2	18 months to < 30 months	1 to 3	
Tulips 2	18 months to < 30 months	1 to 4	Naptime
Sunflowers	3 years to < 4 years	2 to 6	
Sunflowers	3 years to < 4 years	1 to 5	Naptime

**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: 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 number(s) 1 and 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: 07/31/2022

**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 tulip 2 group(s) 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: 07/31/2022

**Domain: 09 Children's Files**

Rule: 5101:2-12-25 Medication Administration

Code: The program is required to store medication out of the reach of children.

Finding: During the inspection, it was determined that a medication, gas drops and Gripe Water, was within the reach of children in the tulip 1 room in the child's cubby box located at floor level. All medications must be stored out of the reach of children. Create procedures that assure medications will always be inaccessible to children. 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: 07/31/2022

**Domain: 09 Children's Files**

Rule: 5101:2-12-25 Medication Administration



Code: The program is required to use the appropriate form and retain current documentation to administer medications. The program is also required to obtain separate documentation for each medication and child, and retain on file each JFS 01217 "Request for Administration of Medication for Child Care" for at least one year. The program is required to administer medication only if it has the prescription label attached or has written instructions from a licensed physician. The program is also required to have each medication to be administered stored in its original container.

Finding: During the inspection, it was determined the program did not meet the requirement(s) for administering a medication or medical food that is not required by a JFS 01236 "Child Medical/Physical Care Plan for Child Care" or a prescription topical product to a child as noted in number(s) 15, 16, 17, 18 below:

1. No JFS 01217 "Request for Administration of Medication for Child Care" was on file.
2. The child's name was missing on the JFS 01217.
3. The child's date of birth was missing on the JFS 01217 and was needed to determine the correct dosage.
4. The child's weight was missing on the JFS 01217 and was needed to determine the correct dosage.
5. The name of the medication was missing on the JFS 01217.
6. The exact dose was missing on the JFS 01217.
7. The time to administer was missing on the JFS 01217.
8. The time period to administer was missing on the JFS 01217.
9. The medication's expiration date was missing on the JFS 01217.
10. The Parent/Guardian's dated signature was missing on the JFS 01217.
11. Physician instructions were missing on the JFS 01217.
12. Possible side effects were missing on the JFS 01217.
13. Physician's dated signature was missing on the JFS 01217.
14. Physician's phone number was missing on the JFS 01217.
15. Date medication was administered was missing on the JFS 01217.
16. Time medication was administered was missing on the JFS 01217.
17. Dosage administered was missing on the JFS 01217.
18. Staff member's signature was missing on the JFS 01217.
19. A prescription label was not attached to the prescription medication.
20. The medication or product, [ ], was not brought to the program in its original container.
21. Parent instructions conflict with either the manufacturer or physician instructions.

Submit the program's corrective action plan, which includes the completed JFS 01217 for each child needed, verification that the prescription label is now attached, and/or verification that the medication or product is now in its original container, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/31/2022



### Low Risk Non-Compliances

#### 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 number(s) 2 below:

1. The 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: 07/31/2022

#### Domain: 02 Safe & Sanitary Environment

**Rule:** 5101:2-12-12 Safe Equipment

**Code:** The program is required to use only mats that are intended to be a fall surface per manufacturer's guidelines and the correct size to place under indoor equipment.

**Finding:** During the inspection, it was determined that landing mats did not meet the rule requirement as noted in number(s) 1 and 3 below:

1. The mats were not at least one and one-half inches thick (wooden set with climbing ladders and monkey bars);
2. The mats were not used according to the manufacturer's guidelines;
3. The mats were not under the monkey bars.

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

Corrective Action Plan Due: 07/31/2022



**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(s) 5 below, were in the sunflower 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 [ ].

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: 07/31/2022

**Domain: 02 Safe & Sanitary Environment**

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

**Code:** The program is required to provide equipment and materials that are easy to clean.

**Finding:** During the inspection, it was determined that at least one piece of equipment, furnishings, or material at the program was not constructed of materials to facilitate cleaning as noted in number(s) 1 below:

1. The material had a tear (diaper changing mat in tulip 2 room).
2. The material was not washable.
3. The material was porous.
4. The surface was cracked.
5. The surface was repaired, but in a manner that still did not facilitate cleaning.
6. Other [ ].

Equipment, furnishings, and furniture shall be constructed of materials to facilitate cleaning. 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: 07/31/2022

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Environment

**Code:** The program is required to store chemicals in a place that is inaccessible to children.

**Finding:** During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in number(s) 2 below:

1. Cosmetics;
2. Disinfecting wipes;
3. Fish food;
4. Hand lotion;
5. Hand sanitizer (for children under 24 months);
6. Laundry detergent;
7. Powder dish washing soap;
8. Paint cans;
9. White out;
10. Potting Soil;
11. Other potentially hazardous substance [ ].

The potentially hazardous substance was determined to be accessible to children in the following area: unlocked cabinet in unlocked kitchen and unlocked cabinet under sink in marigold room.

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/31/2022

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Equipment

**Code:** The program is required to refrain from placing indoor swings, slides, climbers, and climbing apparatus directly over a hard surface.

**Finding:** The rule requires that indoor swings, slides, climbers, and climbing apparatus shall not be placed over concrete, tile, carpet, or any similarly hard surface. During the inspection, it was determined that rocking horses



in the marigold and tulip 2 room were placed on tile. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/31/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to refrain from using trampolines, inflatable bounce houses, and ball pits.

Finding: During the inspection, it was determined that the program had equipment that was prohibited for children to use as noted in number(s) 5 below:

1. Trampoline.
2. Inflatable bounce house.
3. Inflatable slide.
4. Inflatable equipment used for climbing and bouncing.
5. Ball pit.
6. Other [ ].

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

Corrective Action Plan Due: 07/31/2022

**Domain: 03 Postings & Equipment**

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

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number(s) 1 and 3 (tulips 2 room) below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for [ ].
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 07/31/2022





**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(s) 1 below:

1. The plan was not posted in each classroom (not posted in tulips 1 room).
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: 07/31/2022

**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(s) 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: 07/31/2022

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item number(s) 1, 2, and 3 below:

1. Monthly fire drills.
2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 07/31/2022

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-23 Infant Bottle and Food Preparation

Code: The program is required to obtain written instructions from parents regarding feeding their infant.

Finding: During the inspection, it was determined that written instructions for feeding the infants were missing information as noted in number(s) 1 below:

1. Written instructions were not on file.
2. Type of food and/or formula/breast milk was missing.
3. Amount of food and/or formula/breast milk was missing.
4. Feeding times or frequency of feedings was missing.
5. The written instructions on file had not been updated.

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: 07/31/2022



**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-23 Infant Bottle and Food Preparation

**Code:** The program staff is required to label bottles containing formula or breast milk.

**Finding:** During the inspection, it was determined that bottles containing formula for a particular infant were not labeled with the child's name and date of preparation. 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: 07/31/2022

**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-23 Infant Bottle and Food Preparation

**Code:** The program is required to safely store, prepare, and serve formula, breast milk, and food.

**Finding:** During the inspection, it was determined that open containers of ready to serve food and concentrated formula was not stored appropriately as noted in number(s) 2 below:

1. The food/formula was not covered;
2. The food was not dated (infant refrigerator);
3. The food/formula was not refrigerated according to the manufacturer's instructions;
4. The food/formula was not discarded or sent home daily if not used;
5. The food/formula was not refrigerated upon arrival;
6. The food/formula was not refrigerated immediately after preparation;
7. The food/formula was served beyond the expiration date;
8. The food/formula was not prepared prior to the manufacturer's instructions;
9. The food/formula was not prepared according to the instructions from the infant's physician, physician's assistant or certified nurse practitioner;
10. 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: 07/31/2022



**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-20 Cribs

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

Finding: During the inspection, it was determined that cribs were not two feet apart when in use, as required by this rule. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 07/31/2022

**Domain: 08 Staff Files**

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

Code: 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.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 1, 2, 3, 4 below:

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

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

Corrective Action Plan Due: 07/31/2022

**Domain: 08 Staff Files**

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



Code: The program is required to receive a preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: During the inspection, it was determined that a child care staff member, with preliminary approval on file, had sole responsibility of children in the sunflower group(s) and the JFS 01176 "Program Notification of Background Check Review for Child Care" was not 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: 07/31/2022

**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.

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 07/31/2022

**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 or in the Ohio Professional Registry.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry 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: 07/31/2022

**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 number(s) 1, 2, 3, 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: 07/31/2022

**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: 07/31/2022

**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(s) 4, 5, 6, 8, 10, 11, 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: 07/31/2022

**Domain: 09 Children's Files**

Rule: 5101:2-12-25 Medication Administration

Code: The program staff is required to obtain signed written permission prior to administering topical products and lotions other than hand sanitizer to be used by children older than twenty-four months and lip balm.



Finding: During the inspection, it was determined the program did not obtain signed written permission from the parent prior to administering topical products and lotions, other than hand sanitizer to be used by children older than twenty-four months and lip balm (diaper cream). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/31/2022

**Domain: 09 Children's Files**

Rule: 5101:2-12-25 Medication Administration

Code: The program is required to have medication, medical foods and topical products labeled with the child's name.

Finding: During the inspection, it was determined that a medication, medical food or topical product was at the program which had not been labeled with the child's name (Gripe Water and gas drops). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/31/2022

**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(s) 1 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: 07/31/2022

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
5101:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: 9926943, expires 3/1/23.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-05 Denial, Revocation and Suspension	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-07 Administrator Qualifications	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-07 Written Program Policies and Procedures	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-10 Professional Development Requirements	Not Verified	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Indoor Space Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Outdoor Play Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Staff and children were observed washing hands as required by the rule.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
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: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions but the JFS 1236 Medical/Physical Care Plan form was discussed.
Rule: 5101:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had complete first aid kits available as required.
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule: 5101:2-12-17 Daily Outdoor Play	Compliant	
Rule: 5101:2-12-18 License Capacity	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 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	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: The program served the following: breakfast: oatmeal, strawberries, bananas and milk; lunch: pizza, salad, applesauce and milk.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
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	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet Training	Compliant	