

## **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        | ails            |                    |
|--|---------------------|-----------------|--------------------|
| Program Name                                     | Program Number      |                 | Program Type       |
| Little Buckeye Learning Center-Stelzer           | 2220025789          |                 | Child Care Center  |
| Address<br>407 Stelzer Road Columbus<br>OH 43219 |                     |                 | County<br>FRANKLIN |
| Building Approval Date 03/13/2019                | Use Group/Code<br>E | Occupancy Limit | Maximum Under 2 ½  |
| Fire Inspection Approval Date 03/22/2022         | Food Service Risk L | evel            |                    |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection So                  | cope             | Inspection Notice |              |
| Provisional                | Full                           |                  | Unannounced       |              |
| Inspection Date 01/05/2023 | Begin Time 8                   | :12 AM           | End Time 2:15 PM  |              |
| Reviewer:                  |                                |                  |                   |              |
| Rebecca Worrell            |                                |                  |                   |              |
|                            | Summary of Findings            |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 9                              | 0                | 1                 | 13           |

| 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)                                  |                  | 9         | 0          | 9     |  |
| Young Toddler   |                  | 8         | 0          | 8     |  |
| Total Under 2 ½ Years                                     | 75               | 17        | 0          | 17    |  |
| Older Toddler   |                  | 9         | 0          | 9     |  |
| Preschool   |                  | 40        | 0          | 40    |  |
| School Age  |                  | 34        | 0          | 34    |  |
| Total Capacity/Enrollment                                 | 141              | 83        | 0          | 100   |  |

| S     | taff-Child Ratios at the Time of Ins | pection        |         |
|-------|--------------------------------------|----------------|---------|
| Group | Age Group/Range                      | Ratio Observed | Comment |

| Infant      | 0 to < 12 months         | 1 to 4  | at arrival                                   |
|-------------|--------------------------|---------|--|
| Infant      | 0 to < 12 months         | 2 to 7  | nap  |
| Toddler     | 18 months to < 30 months | 1 to 5  | at arrival                                   |
| Toddler     | 18 months to < 30 months | 2 to 10 | nap  |
| Toddler 2   | 30 months to < 36 months | 1 to 6  | at arrival                                   |
| Toddler 2   | 30 months to < 36 months | 1 to 7  | nap  |
| Preschool 1 | 3 years to < 4 years     | 1 to 4  | small group                                  |
| Preschool 2 | 3 years to < 4 years     | 2 to 14 | All preschool and pre-k combined at arrival  |
| Preschool 2 | 3 years to < 4 years     | 1 to 23 | All preschool<br>children<br>combined at nap |
| Pre-K       | 4 years to < 5 years     | 1 to 7  | nap  |
| School Age  | 11 years +               | 1 to 14 | on bus                                       |
| School Age  | School-Age to < 11 years | 1 to 7  | waiting for bus transportation               |

## **Summary of Non-Compliances**

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

| Serious Risk Non-Compliances   |
|--|
| No Serious Risk Non-Compliances were observed during this inspection |
|  |
|  |
|  |
|  |
|  |

## **Moderate Risk Non-Compliances**

**Domain: 08 Staff Files** 

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

Code: The program is required to have staff update their background checks every five years as required.



<u>Finding</u>: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number(s) 3 below:

- 1. Owner
- 2. Administrator
- 3. Child care staff member, employee

Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/05/2023

## **Low Risk Non-Compliances**

## Domain: 02 Safe & Sanitary Environment

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

Code: The program is required to clean equipment throughout the day if dirty or soiled.

<u>Finding</u>: During the inspection, it was determined that the following equipment was unclean or soiled during daily use kitchens in the dramatic play area in all classrooms and shelf tops. 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: 02/05/2023

#### 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.

<u>Finding</u>: During the inspection, it was determined that at least one child in the Preschool group did not wash his or her hands at the time listed in number(s) 1 & 7 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: 02/05/2023

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

Rule: 5101:2-12-13 Handwashing Requirements

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

<u>Finding</u>: During the inspection, it was determined that at least one staff member with the Toddler group did not wash his or her hands at the time listed in number(s) 3 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.

#### **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.

<u>Finding</u>: 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. (Futon in School Age room, torn backing)
- 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: 02/05/2023

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

Rule: 5101:2-12-12 Safe Equipment

<u>Code</u>: The program is required to provide equipment that is safe and hazard free.

<u>Finding</u>: During the inspection, equipment was determined to be unsafe or hazardous to children and in need of repair as noted in number(s) 1 & 7 below:

- 1. The equipment had sharp points or corners; Plastic storage bin in Preschool Bathroom
- 2. The equipment had splinters;
- 3. The equipment had protruding nails;
- 4. The equipment had loose or rusty parts;
- 5. The equipment had paint which contains lead or other poisonous materials;
- 6. The equipment had hazardous features;
- 7. Other: plastic step stool in Toddler Bathroom was cracked in the middle.

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



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

Rule: 5101:2-12-12 Safe Environment

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

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

Corrective Action Plan Due: 02/05/2023

## Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

<u>Finding</u>: During the inspection, it was determined that the program had an area rug that did not have a nonskid backing, causing a slip and fall hazard. A walking surface that is not hazardous to children must be maintained at the program. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 02/05/2023

## Domain: 02 Safe & Sanitary Environment

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

Code: The program is required to follow the cleaning schedule for equipment.

<u>Finding</u>: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number(s) 10 below:

- 1. The changing table was not sanitized after each use.
- 2. Reusable cloths were not being cleaned daily or when visibly soiled.
- 3. Dividers were not cleaned when visibly soiled.

- 4. The food prep areas were not being cleaned and sanitized before and after food prep.
- 5. The food prep areas were not being cleaned and sanitized between preparing raw and cooked food.
- 6. Toilet seat(s), handle(s) and toilet bowl(s) were not being cleaned when visibly soiled and sanitized.
- 7. The sinks were not clean.
- 8. Diaper receptacles were not being cleaned and sanitized.
- 9. Potty chairs were not emptied and/or cleaned and sanitized after each use.
- 10. Wastebaskets/trash receptacles/rinse buckets were not being cleaned and sanitized when visibly soiled.
- 11. Other [ ].

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to 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: 02/05/2023

## **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.

<u>Finding</u>: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 5 below, were in the Preschool 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.



#### Domain: 05 Health & Safety

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

<u>Code</u>: The program is required to provide food that does not pose as a choking hazard and is appropriate for the age of the children.

<u>Finding</u>: During the inspection, it was determined that the Toddler group was served uncut meatballs, which posed a choking hazard. 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: 02/05/2023

#### **Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-20 Cribs

<u>Code</u>: The program staff is required to remove any items listed in rule that obstruct the staff's view of the infant from cribs.

<u>Finding</u>: During the inspection, it was determined that a child had been placed in a crib with an object which could obstruct a child care staff member's view of the infant, but is not likely to create a potential suffocation risk, as indicated in number(s) 2 below:

- 1. Busy box or other toy attached to the side of the crib.
- 2. A blanket hanging over the side of the crib. (Sleep sack hanging on crib when is use)
- 3. Stuffed animal that is not large/soft enough that it could conform to the shape of the child's face.
- 4. Other [ ].

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

Corrective Action Plan Due: 02/05/2023

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

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

<u>Code</u>: The program is required to have staff complete the online staff orientation training.

<u>Finding</u>: 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: 02/05/2023

**Domain: 08 Staff Files** 

Rule: 5101:2-12-08 Medical Statement

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

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 4abcd.

- 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.

# Rules In-Compliance/Not Verified

| Pulo                               | Ctatus    | Documenting Statement/s) If applicable    |
|------------------------------------|-----------|---|
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-02 License Posted        | Compliant |   |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-02 Current Information   | Compliant |   |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-03 Inspection            | Compliant |   |
| Requirements                       |           |   |
| ·                                  | 1         |   |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Building Department   | Compliant |   |
| Inspection                         | Compilant |   |
| Inspection                         |           |   |
| 2.1                                |           | D C                                       |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Fire Inspection       | Compliant |   |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Food Service    | Compliant | Documenting Statement: The food service   |
| Requirements                       |           | license was observed posted. Following is |
|                                    |           | the audit number and date of expiration:  |
|                                    |           | audit number 9946520 expires 3/1/23.      |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator         | Compliant |   |
| Qualifications                     | Compilant |   |
| Qualifications                     |           |   |
| D. J.                              | Chathar   | Danish Chata (1) (5 1)                    |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator         | Compliant |   |
| Responsibilities/Requirements      |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: No changes         |
| Policies and Procedures            | '         | have been made to the written policies    |
| . SSies and i recedules            | l         | have been made to the written pondes      |

|  |                     | and procedures since it was last approved by this Department.               |
|--|---------------------|---|
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-08 Child Care Staff Member<br>Educational Requirements | Compliant           | bocumenting statement(s), if applicable                                     |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-10 Health Training                                     | Compliant           |   |
| Requirements   |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-10 Professional  | Compliant           | Documenting Statement(s), if applicable                                     |
| Development Requirements   | Compilant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-11 Indoor Space  | Compliant           |   |
| Requirements   |                     |   |
| Dula   | Chahua              | Decree entires (tetere ent/s) If annice bla                                 |
| Rule 5101:2-12-11 Separation of Children                         | Status<br>Compliant | Documenting Statement(s), If applicable                                     |
| Under 2 1/2 Years  | Compilant           |   |
| onder 2 1/2 rears  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| Rule: 5101:2-12-11 Outdoor Space                                 | Compliant           | Documenting Statement: The quarterly  |
| Requirements   |                     | playground inspections were completed                                       |
|  |                     | and documented, as required. The most                                       |
|  |                     | recent inspection report form was dated                                     |
|  |                     | 11/3/2022.  |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-11 Outdoor Play Equipment                              | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-11 Outdoor Play Fall Zones                             | Compliant           |   |
| ,  | '                   |   |
|  | I -                 |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| Rule: 5101:2-12-13 Smoke Free                                    | Compliant           | Documenting Statement: A notice was observed posted stating that smoking is |
| Environment  |                     | prohibited at the program.  |
|  |                     | promoted at the program.  |
|  | 1                   |   |
| Rule   | Status              | Documenting Statement(s), If applicable                                     |
| Rule: 5101:2-12-14 Transportation and                            | Compliant           | Documenting Statement: The driver(s)  |
| Field Trip Procedures  |                     | had current and valid training in first aid,                                |

| - Calonia O                                       |           |  |
|---|-----------|--|
|   |           | management of communicable disease, and CPR. |
| Rule: 5101:2-12-14 Transportation and             | Compliant | Documenting Statement: The form(s)           |
| •   | Compliant |  |
| Field Trip Procedures                             |           | used by the program for routine and/or       |
|   |           | field trips were verified to meet the        |
|   |           | requirements of the rule.                    |
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable      |
|   |           | Documenting Statement(s), if applicable      |
| 5101:2-12-14 Transportation - Driver Requirements | Compliant |  |
| Requirements                                      |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-14 Transportation -               | Compliant | Documenting Statement: An annual             |
| Vehicle Requirements                              |           | safety check of the vehicle(s), using the    |
| venicle nequirements                              |           | ,  |
|   |           | JFS 01230 "Vehicle Inspection Report For     |
|   |           | Child Care Centers" form, was verified       |
|   |           | and dated 4/5/2022.                          |
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-15 Child Medical and              | Compliant | Documenting Statement: In review of          |
| Enrollment Records                                | Compilant | 25% of the records, at the time of the       |
| Linoinnent Records                                |           | ·  |
|   |           | inspection, children's medical statements    |
|   |           | were complete and on file, as required by    |
|   |           | the rule.                                    |
| Rule: 5101:2-12-15 Child Medical and              | Compliant | Documenting Statement: At the time of        |
| Enrollment Records                                | Compilant | the inspection, 25% of the children's        |
| Elifoliment Records                               |           |  |
|   |           | records were reviewed, and the records       |
|   |           | were complete, as required by the rule.      |
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-15 Medical/Physical               | Compliant | Documenting Statement: The program           |
| Care Plans  |           | had current information on the medical       |
| Care rians  |           |  |
|   |           | status and the required treatment plan       |
|   |           | for the children with health conditions.     |
|   | l         |  |
| 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      |
| and deficient Efficiency Figure                   |           | JFS 01242 "Medical, Dental, and General      |
|   |           |  |
|   |           | Emergency Plan For Child Care" were          |
|   |           | posted in the program as required.           |
|   |           |  |
|   |           |  |

| Rule   | Status      | Documenting Statement(s), If applicable   |
|--|-------------|---|
| Rule: 5101:2-12-16 Emergency Drills  | Compliant   | Documenting Statement: Documentation      |
| There is a second of the secon |             | for completed fire, weather, and          |
|  |             | emergency/lockdown drills was verified    |
|  |             | during this inspection.                   |
|  |             | during this inspection.                   |
|  | I           |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 First Aid/Standard  | Compliant   | Documenting Statement: During the         |
| Precautions  |             | inspection, the program had complete      |
|  |             | first aid kits available as required.     |
|  |             |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Management of   | Compliant   | Documenting Statement: The JFS 08087      |
| Communicable Disease   | - Samphanic | "Communicable Disease Chart" was          |
| Communication Discuse  |             | posted and was readily available to staff |
|  |             | and parents.                              |
|  |             | and parents.                              |
|  |             |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Incident/Injury   | Compliant   |   |
| Reporting  |             |   |
| Rule   | Status      | Documenting Statement(c) If applicable    |
| 5101:2-12-16 Written Disaster Plan   | Compliant   | Documenting Statement(s), If applicable   |
| 3101.2-12-10 Written Disaster Flam   | Compliant   |   |
|  | 1           |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Daily Schedule  | Compliant   | Documenting Statement: Daily schedules    |
|  |             | were observed posted.                     |
|  |             |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Materials and   | Compliant   | bocumenting statement(s), if applicable   |
| Equipment  | Comphant    |   |
| Edarburent   | ı           |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Daily Outdoor Play  | Compliant   | Documenting Statement: Outdoor play       |
|  |             | was observed for the toddler group(s).    |
|  |             |   |
|  | 1           |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-18 License Capacity  | Compliant   |   |
| [-   | 1           |   |
| Rule   | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Ratio   | Compliant   | Documenting Statement: The Appendix A     |
|  |             | "Staff/Child Ratios, Age Grouping and     |
|  |             | - , ,                                     |

|  |                     | Maximum Group Size" was posted in a noticeable area at the program as required.   |
|--|---------------------|---|
| Rule                                       | Status              | Decumenting Statement(s) If applicable  |
| Rule: 5101:2-12-18 Group Size              | Compliant           | Documenting Statement(s), If applicable  Documenting Statement: The group sizes observed on the day of the inspection were in compliance. |
| Rule                                       | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-18 Attendance Records            | Compliant           | bocumenting statement(s), ii applicable   |
| 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           | bocumenting statement(s), ii applicable   |
| Rule                                       | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-20 Cots and Napping              | Compliant           |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Fluid Milk Requirements       | Compliant           |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Safe Food<br>Handling/Storage | Compliant           |   |
|  | I 6                 |   |
| Rule: 5101:2-12-23 Infant Daily Care       | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: Appropriate   |
| Naic. 3101.2 12 23 illiant bany care       | Compilant           | daily written records for all infants were viewed.  |
|  |                     |   |
| Rule: 5101:2-12-23 Infant Bottle and       | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: All bottles were  |
| Food Preparation                           | Compilant           | labeled as required.  |
| Rule                                       | Status              | Documenting Statement/s) If annies his  |
| Rule: 5101:2-12-23 Diapering and           | Compliant           | Documenting Statement(s), If applicable  Documenting Statement: Appropriate   |
| Toilet Training                            |                     | diaper changing procedures were   |



|                                 |           | observed during the inspection in the infant room. |
|---------------------------------|-----------|--|
| Rule                            | Status    | Documenting Statement(s), If applicable            |
| 5101:2-12-24 Swimming and Water | Compliant |  |
| Safety Requirements             |           |  |
|                                 |           |  |
| Rule                            | Status    | Documenting Statement(s), If applicable            |
| 5101:2-12-25 Medication         | Compliant |  |
| Administration                  |           |  |