



## 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 The Gardner School	Program Number 2220026059	Program Type Child Care Center	
Address 9370 Waterstone Boulevard Cincinnati OH 45249		County WARREN	
Summary of Program Details			
Building Approval Date 09/25/2000	Use Group/Code E	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 03/26/2025	Food Service Risk Level Level II		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 11/05/2025	Begin Time 8:40 AM	End Time 6:15 PM
Reviewer: PAMELA DAUDISTEL		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 14	No. Serious Risk 0	No. Moderate Risk 2	No. Low Risk 14

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)		32	0	32
Young Toddler		30	0	30
<b>Total Under 2 ½ Years</b>	78	62	0	62
Older Toddler		32	0	32
Preschool		56	0	56
School Age		1	0	1
<b>Total Capacity/Enrollment</b>	206	89	0	151

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

Fascination A	0 to < 12 months	2 to 7	@ arrival
Fascination A	0 to < 12 months	2 to 9	@ lunch time
Fascination B	0 to < 12 months	2 to 8	@ nap time
Fascination B	0 to < 12 months	2 to 8	@ arrival
Fascination C	12 months to < 18 months	1 to 6	@ naptime
Fascination C	0 to < 12 months	2 to 9	@ arrival
Discovery A	12 months to < 18 months	1 to 6	@ lunch time
Discovery A	12 months to < 18 months	2 to 7	@ arrival
Discovery B	12 months to < 18 months	2 to 8	@ lunch time
Discovery B	12 months to < 18 months	2 to 7	@ arrival
Exploration A	18 months to < 30 months	2 to 13	@ lunch time
Exploration A	18 months to < 30 months	2 to 8	@ arrival
Exploration B	18 months to < 30 months	2 to 14	@ lunch time
Exploration B	18 months to < 30 months	2 to 11	@ arrival
Acceleration A	3 years to < 4 years	1 to 7	@ arrival
Acceleration A	3 years to < 4 years	1 to 10	@ nap time
Imagination	30 months to < 36 months	2 to 12	@ lunch time
Imagination	30 months to < 36 months	1 to 8	@ arrival
Enchantment B	30 months to < 36 months	1 to 8	@ lunch time
Enchantment B	30 months to < 36 months	1 to 7	@ arrival
Enchantment A	3 years to < 4 years	2 to 9	@ arrival
Enchantment A	3 years to < 4 years	2 to 17	@ lunch time
Acceleration B	4 years to < 5 years	2 to 16	@ arrival
Acceleration B	4 years to < 5 years	2 to 20	@ lunch time

### 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 5180:2-12-03 and 5180:2-13-03 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: 02 Safe & Sanitary Environment

Rule: 5180:2-12-12 Safe Equipment

Code: The program is required to refrain from using space heaters unless it has been approved by a fire official.

Finding: During the inspection, it was determined that a space heater which had not been approved by a fire official was in use in the area identified in number(s) 1 below:

1. The administrator's office.
2. A classroom.
3. The break room.
4. Several classrooms.
5. The hallway.
6. The entry way.
7. Other [ ].

The use of this space heater must be discontinued until approval for its use has been obtained. Submit the program's corrective action plan, which includes written fire approval for use of this space heater or a written statement that the space heater is no longer being used at the program, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/12/2025

#### Domain: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans

Code: 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.

Finding: 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 number(s) 1 below:

1. No plan was on file.  
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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.

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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.

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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.

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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: 12/12/2025

### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5180:2-12-20 Cots and Napping

Code: The program is required to not block pathways or exits with furniture or materials while the children are resting, napping, and/or sleeping.

Finding: During the inspection, it was determined that the placement of cots or mats in the Imagination A nap room did not meet the requirements as noted in number(s) 2 below:

1. The placement did not allow for a clear pathway to each cot.
2. Cots or mats blocked exits.

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: 02 Safe & Sanitary Environment

Rule: 5180:2-12-13 Sanitary Equipment and Environment

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

Finding: 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) 6, 30 below:

1. Item(s) soiled with blood or bodily fluids were not cleaned/sanitized immediately.
2. Blankets/sheets were not cleaned weekly, when soiled, or before use by another child.
3. Children's individual blankets and belongings were stored in an unsanitary manner.

4. Bottles, bottle caps, nipples and other equipment used for bottle feeding were not cleaned and sanitized in a dishwasher or by washing, rinsing, and boiling for one minute.
5. Carpets were not vacuumed weekly or cleaned when soiled.
6. Changing table/pad was not sanitized after each use or cleaned when visibly soiled.
7. Reusable cloths were not being washed daily or when visibly soiled.
8. Cots/Pads/Mats were not cleaned and sanitized before assigning to a different child, when used by a sick child, when soiled or at least every three months.
9. Cribs were not cleaned and sanitized monthly, or when soiled, or before use by another child.
10. Diaper Receptacles were not cleaned and sanitized daily or more frequently as needed to eliminate odor.
11. Dishes/Cups/Silverware were not cleaned and sanitized after each use.
12. Water Containers were not labeled with the child's name, or were not cleaned and sanitized before use again on another day.
13. Dividers were not cleaned when visibly soiled.
14. Dress up clothes and hats (dramatic play) were not cleaned monthly or when soiled.
15. Floors were not cleaned weekly or when soiled.
16. The food prep area, including sinks, were not cleaned before and after preparing food (including bottle preparation) or between preparing raw or cooked food.
17. Potty chairs were not cleaned after each use, rinsed with water, cleaned and sanitized or contents were not emptied into a toilet.
18. Food tables, highchair trays were not cleaned before and after each use.
19. Tables used for play were not cleaned when visibly soiled or sanitized daily.
20. Toilet bowls were not cleaned when visibly soiled or sanitized weekly.
21. Toilet seat(s), handle(s) and hand washing sink(s) were not cleaned when visibly soiled or sanitized daily.
22. Mouthed toys were not cleaned and sanitized after each child's use.
23. Toys, other than those mouthed by children, were not cleaned monthly or when visibly soiled.
24. Washable furniture, including fabrics on infant equipment, were not cleaned weekly or when soiled.
25. Upholstered furniture was not steam cleaned when soiled.
26. Slip covers were not washed at least every six months or when soiled.
27. Wastebaskets/rinse buckets, including lids, were not being emptied daily or cleaned and sanitized when visibly soiled.
28. The manufacturer's directions for the cleaning product were not followed.
29. The solution used for sanitizing was not a commercial product registered by the United States Environmental Protection Agency as a sanitizer.
30. Other: toy, pillow, lid to soiled diaper can contaminated after a diaper change were not cleaned, disinfected.

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 not required at this time.

**Rule:** 5180:2-12-13 Handwashing Requirements

**Code:** The program is required to have all staff and children wash their hands as outlined in rule.

**Finding:** During the inspection, it was determined that handwashing requirements were not followed as listed in number(s) 5 below, as required in rule.

1. At least one staff/child did not wash their hands upon arrival for the day.
2. At least one staff/child did not wash their hands prior to departure.
3. At least one staff did not wash their hands upon entry into a classroom.
4. At least one staff/child did not wash their hands after toileting or assisting a child with toileting.
5. At least one staff/child did not wash their hands after each diaper change or pull-up change.
6. At least one staff did not wash their hands after contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
7. At least one child did not wash their hands after contact with bodily fluids.
8. At least one child did not wash their hands after returning inside after outdoor play.
9. At least one staff did not wash their hands after cleaning or sanitizing or using any chemical products.
10. At least one staff/child did not wash their hands after handling pets, pet cages or other pet objects that have come in contact with the pet.
11. At least one staff did not wash their hands before eating, serving or preparing food or bottles or feeding a child.
12. At least one child did not wash their hands before eating or assisting with food preparation.
13. At least one staff did not wash their hands before and after completing a medical procedure or administering medication.
14. At least one child did not wash their hands after water activities.
15. At least one staff/child did not wash their hands when visibly soiled (must use soap and water).
16. Other [ ].

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

Corrective Action Plan Due: 12/12/2025

**Domain: 03 Postings & Equipment**

**Rule:** 5180:2-12-16 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 (none in Acceleration A, Enchantment A).
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: 12/12/2025

**Domain: 04 Indoor/Outdoor Space**

Rule: 5180:2-12-11 Outdoor Play Equipment

Code: The program is required to provide equipment that does not pose a safety risk and must follow the manufacturer's guidelines for assembling, installing and using the equipment.

Finding: During the inspection, it was determined that outdoor play equipment was unsafe or not used as intended as noted in number(s) 2 below on the Toddler climber:

1. There was rust exposed.
2. There were protruding bolts; screws.
3. There were cracks.
4. There were holes.
5. There was splintering wood.
6. There were sharp edges or points.
7. There were lead hazards.
8. There were toxic substances.
9. There were tripping hazards.
10. There was chipped and/or peeling paint.
11. The sandbox was not covered when the program was closed or during non-daylight hours.
12. Outdoor equipment, [ ] was not developmentally appropriate.
13. Outdoor equipment, [ ], was placed in the main traffic pattern.
14. Outdoor play equipment, [ ], was positioned too closely together, posing a risk of injury if a child were to fall from one piece of equipment into another.
15. Outdoor equipment, [ ], was not securely anchored but did not present a risk of imminent danger of the structure collapsing when children are using the equipment
16. Outdoor equipment, [ ], was 30 inches or more from the ground and did not have a protective barrier that would prevent a child from falling off this piece of equipment.

17. The manufacturer's guidelines for assembly and installation were not followed for the [ ].
18. Functionally linked equipment was used by preschool-age children and the distance between two adjacent pieces of equipment exceeded 12 inches.
19. Functionally linked equipment was used by school-age children and the distance between two adjacent pieces of equipment exceeded 18 inches.
20. Other [ ].

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

Corrective Action Plan Due: 12/12/2025

**Domain: 07 Diapering & Infant Care**

Rule: 5180:2-12-20 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 not required at this time.

**Domain: 07 Diapering & Infant Care**

Rule: 5180:2-12-23 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 breast milk/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 not required at this time.

**Domain: 07 Diapering & Infant Care**

**Rule:** 5180:2-12-23 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 noted on the Children Record Review were missing information as noted in number(s) 1. 5 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 not required at this time.

**Domain: 08 Staff Files**

**Rule:** 5180:2-12-10 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) 2, 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(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: 12/12/2025

**Domain: 08 Staff Files**

Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection

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

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

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 12/12/2025

**Domain: 08 Staff Files**

Rule: 5180:2-12-10 Professional Development Requirements

Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number(s) 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
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: 12/12/2025

**Domain: 09 Children's Files**

Rule: 5180:2-12-15 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, 6, 7, 10 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: 5180:2-12-15 Medical/Physical Care Plans

Code: The program is required to maintain a complete JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file for any child having a health condition.

Finding: In review of the children's records, it was determined that the JFS 01236 "Child Medical/Physical Care Plan for Child Care" did not meet the requirements of the rule as noted in number(s) 1, 3 below:

1. The JFS 01236 had not been updated as needed and at least annually (doctor's instructions for Benadryl).
2. A separate JFS 01236 had not been used for each condition.
3. The program used an old version of the JFS 01236 (page 1 of 1 plan).

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

Corrective Action Plan Due: 12/12/2025

**Domain: 10 Written Policies & Procedures**

Rule: 5180:2-12-16 Written Disaster Plan

Code: The program is required to have a written disaster plan.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 4 (snow/blizzard/ice storm); 16, 18, 19 below:

Procedures:

1. The written disaster plan had not been completed
2. The plan was not provided to all child care staff and employees
3. The plan was not used to respond to an emergency or disaster situation
4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
5. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
7. Outbreaks, epidemics or other infectious disease emergencies
8. Loss of power, water, or heat
9. Other threatening situations that may pose a health or safety hazard to the children in the program

Details:

10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
11. A designated safe site where staff and children can safely remain when evacuated.
12. Assisting infants, toddlers and children with special needs and/or health conditions
13. Emergency contact information for parents and the program
14. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
15. Procedures for communicating with parents during loss of communications, no phone or internet service available
16. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
17. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
18. Making the plan available to all child care staff members and employees
19. Training of staff or reassignment of staff duties as appropriate

- 20. Updating the plan on a yearly basis
- 21. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program's corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/12/2025

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.
Rule: 5180:2-12-04 Building Department Inspection	Compliant	
Rule: 5180:2-12-02 Current Information	Compliant	Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS).
Rule: 5180:2-12-03 Inspection Requirements	Compliant	
Rule: 5180:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable

Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The off-site food processing establishment's current Ohio Department of Agriculture registration information was observed during the inspection.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-07 Administrator Qualifications	Compliant	Documenting Statement: The administrator has completed the rules review course.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-05 Denial, Revocation and Suspension	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-07 Administrator Responsibilities/Requirements	Compliant	Documenting Statement: Employment records for current as well as past employees were being maintained on file as required. Technical assistance was provided regarding adding groups, schedules and role in OCCRA.
Rule: 5180:2-12-07 Administrator Responsibilities/Requirements	Compliant	Documenting Statement: The administrator's hours of availability to meet with parents were posted in a noticeable location.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-08 Medical Statement	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-09 Background Check Requirements	Compliant	Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-11 Indoor Space Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence.
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 9/16/25.
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: Shade is provided by means of trees; a play structure.
Rule: 5180:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: The protective material used under outdoor equipment was mulch.
Rule: 5180:2-12-12 Safe Environment	Compliant	Documenting Statement: Cleaning supplies were viewed stored out of the reach of children.
Rule: 5180:2-12-12 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: 5180:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: No smoking was allowed on the premises, and the notice stating that smoking is prohibited was observed posted in a conspicuous place.
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and

		emergency/lockdown drills was verified during this inspection. Technical assistance was provided regarding documentation of Disaster Drills.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had complete first aid kits available as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement: The 2022 JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
Rule: 5180:2-12-17 Daily Schedule	Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s).
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Attendance 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	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5180:2-12-17 Daily Outdoor Play	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-18 License Capacity	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-18 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: 5180:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-19 Supervision	Compliant	Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group.
Rule: 5180:2-12-19 Supervision	Compliant	Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-19 Child Guidance	Compliant	Documenting Statement: Appropriate child guidance techniques and practices were observed being used during the inspection.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: Meals and snacks were provided at intervals as required by this rule. Lunch was provided by a caterer or parent provided lunches.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-22 Safe Food Handling/Storage	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>

5180:2-12-22 Fluid Milk Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-23 Infant Daily Care	Compliant	Documenting Statement: An appropriate program of activities with infants was observed.
Rule: 5180:2-12-23 Infant Daily Care	Compliant	Documenting Statement: Appropriate daily written records for all infants were viewed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-23 Diapering and Toilet Training	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-25 Medication Administration	Compliant	