



## 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<br>We Love Learning                     | Program Number<br>2220026279        | Program Type<br>Child Care Center |                         |
| Address<br>9234 Colerain Ave. Cincinnati<br>OH 45251 |                                     |                                   | County<br>HAMILTON      |
| Building Approval Date<br>01/27/2022                 | Use Group/Code<br>E                 | Occupancy Limit<br>35             | Maximum Under 2 ½<br>35 |
| Fire Inspection Approval Date<br>05/17/2022          | Food Service Risk Level<br>Level II |                                   |                         |

| Inspection Information         |                          |                                  |
|--------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Provisional | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>11/22/2022  | Begin Time 8:15 AM       | End Time 11:15 AM                |
| Reviewer:<br>SULYN ROMER       |                          |                                  |

| Summary of Findings      |                                      |                       |                        |                    |
|--------------------------|--------------------------------------|-----------------------|------------------------|--------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>18 | No. Serious Risk<br>0 | No. Moderate Risk<br>3 | No. Low Risk<br>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)                                 |                  | 2          | 0         | 2     |
| Young Toddler   |                  | 1          | 0         | 1     |
| <b>Total Under 2 ½ Years</b>                              | 19               | 3          | 0         | 3     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 5          | 0         | 5     |
| School Age  |                  | 2          | 0         | 2     |
| <b>Total Capacity/Enrollment</b>                          | 35               | 7          | 0         | 10    |

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



|                      |                      |        |   |
|----------------------|----------------------|--------|---|
| Infant/Toddler       | 0 to < 12 months     | 1 to 2 |   |
| Preschool/School Age | 0 to < 12 months     | 1 to 6 | All children combined as one group at arrival<br>One staff member present |
| Preschool/School Age | 3 years to < 4 years | 1 to 5 |   |
| Preschool/School Age | 3 years to < 4 years | 1 to 3 |   |

### 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: 05 Health & Safety

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

Code: Meals and snacks provided or served by the program must include all required food groups and meet the recommended daily dietary allowances as specified by the USDA.

Finding: During the inspection, it was determined that a meal or snack at the program did not meet the requirements as noted in number 1 below:

1. The breakfast served did not include foods from three of the four good groups.
2. Snack served did not include foods from two of the four food groups.
3. The meal did not provide 1/3 of the recommended daily dietary allowances as specified by the USDA.
4. Juice used to meet the fruit or snack component was not 100% undiluted fruit or vegetable juice.
5. The meal served did not include an item from the meat or meat alternative group.



6. The meal served did not include an item from the bread or grain group.
7. The meal served did not include two items from the fruit/vegetable group.
8. The meal served did not include a vegetable (two fruits were served).
9. The meal served did not include a serving of fluid milk.

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

Corrective Action Plan Due: 12/23/2022

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

Rule: 5101:2-12-20 Cribs

Code: The program staff is required to remove any items listed in rule that are a potential suffocation risk from cribs.

Finding: During the inspection, it was determined that a child had been placed in a crib with an object that created a potential strangulation or suffocation risk, as indicated in number 2 below:

1. Bib
2. Pacifier clip/ribbon
3. Teething jewelry
4. Blanket for infant under twelve months old
5. Pillow
6. Boppy
7. Bumper pad
8. Clothing stored in the crib
9. Diaper bag
10. Object or toy strung over the crib in which a child can pull himself up
11. Stuffed animal that is large/soft enough to conform to the shape of the child's face
12. Other [ ]

The rule prohibits any item which obstructs child-care staff's visibility or poses a risk of strangulation or suffocation from being placed on or in a crib. Remove the item(s) immediately. 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: 12/23/2022

#### **Domain: 09 Children's Files**





**Rule:** 5101:2-12-15 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. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

**Finding:** A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number 1 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. 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.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

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: 12/23/2022



### 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) 1, 2, 4 below:

1. The name of the child (missing last name).
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: 12/23/2022

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

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

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number 4 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;



5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 12/23/2022

#### **Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing during all transitions.

Finding: During the inspection, it was determined that child care staff were not supervising children closely during transit as noted in number 3 below:

1. Between the offsite outdoor play space and the program;
2. At the offsite outdoor play space;
3. Other: school age children were released at the door to run across/through the parking lot to bus stopped on the street.

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: 12/23/2022

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

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to have all surge protectors and outlets covered.

Finding: During the inspection, it was determined that two (2) outlets did not have childproof receptacle covers in child's restroom. The program must have safety covers on all electrical outlets, including power strips and surge protectors, which are within the reach of the children. 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: 12/23/2022



**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-13 Handwashing Requirements

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

**Finding:** During the inspection, it was determined that at least one staff member with the infant and preschool group did not wash his or her hands at the time listed in number(s) 1, 3, 7, 9 below, as required in rule.

1. Upon arrival for the day.
2. Prior to departure.
3. Upon entry into a classroom.
4. After toileting or assisting a child with toileting.
5. After each diaper change or pull-up change.
6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
7. After cleaning or sanitizing or using any chemical products.
8. After handling pets, pet cages or other pet objects that have come in contact with the pet.
9. Before eating, serving or preparing food or bottles or feeding a child.
10. Before and after completing a medical procedure or administering medication.
11. When visibly soiled (must use soap and water).
12. Other [ ].

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

Corrective Action Plan Due: 12/23/2022

**Domain: 02 Safe & Sanitary Environment**

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

**Code:** The program is required to use straps on equipment that is manufactured with straps.

**Finding:** During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number 2 below:

1. The straps were missing on the [ ].
2. The straps were attached, but were not used on the high chair.
3. The straps were attached and were used, but were not used in a safe manner.
4. Manufacturer's guidelines for the [ ] were not followed in that [ ].





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

Corrective Action Plan Due: 12/23/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to label all cleaning and sanitizing supplies.

Finding: During the inspection, it was determined that not all cleaning/sanitizing supplies had been clearly labeled. When cleaning or sanitizing supplies are not stored in their original containers, the container must be labeled with the contents. 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: 12/23/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to refrain from using spray aerosols while children are in attendance.

Finding: During the inspection, it was determined that a spray aerosol (Lysol) was used in the infant group while children were in attendance. Spray aerosols must not be used when children are in attendance. 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: 12/23/2022

**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 4 below, were in the children's 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: 12/23/2022

**Domain: 02 Safe & Sanitary Environment**

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

Code: The program is required to provide a clean and healthy environment.

Finding: During the inspection, it was determined that the following unsanitary conditions were at the program: the diaper changing station was used for storage/had items placed on it when not in use. A clean and healthy environment, including furniture, materials and equipment must be provided, and the program shall be cleaned daily. 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: 12/23/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

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

Finding: During the inspection, it was determined that at least one child in the Infant and preschool groups did not wash his or her hands at the time listed in number(s) 1, 2, 3, 4, 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: 12/23/2022

#### **Domain: 05 Health & Safety**

Rule: 5101:2-12-16 First Aid/Standard Precautions

Code: The program is required to have a first aid kit onsite.

Finding: During the inspection, it was determined first aid kit(s) at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in number(s) 5, 9, 14 below:

1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
2. One roll of hypoallergenic first-aid tape.
3. Individually wrapped sterile gauze squares in assorted sizes.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.
6. Gauze rolled bandage.
7. Triangular bandage.
8. Rounded end scissors.
9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).
10. A working digital thermometer.
11. Disposable non-latex gloves.
12. A working flashlight.
13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit.



14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.
15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only).
17. Bottled water (field trip or transporting away from the program only).

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: 05 Health & Safety**

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

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

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

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

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

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

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

Code: The program staff is required to discard any formula, breast milk, and food that was directly fed to an infant.



Finding: During the inspection, it was determined that unused portions of formula, and food had been served from a container which the infant was directly fed and was [reheated or served again]. 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: 12/23/2022

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-23 Diapering and Toilet Training

Code: The program staff is required to use and discard a separation material between each diaper change.

Finding: During the inspection, it was determined that the staff did not use a separation material between each diaper change, as required by the rule, at the diaper changing station. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/23/2022

**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 noted on the Children Record Review were missing information as noted in number 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: 12/23/2022





**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: 12/23/2022

**Domain: 07 Diapering & Infant Care**

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

Code: The program is required to provide a daily written record for each infant in care to the parents when picking up the infant each day.

Finding: During the inspection, it was determined that there was no daily written record, as copies of form used were not made, for each infant provided to the parent or person picking up the infant on a daily basis. 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: 12/23/2022

**Domain: 08 Staff Files**

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

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

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

Corrective Action Plan Due: 12/23/2022



**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 1 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: 12/23/2022

**Domain: 08 Staff Files**

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

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number 13 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of [ ] and [ ] did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training



5. CPR – child care staff scheduled during the hours of [ ] and [ ] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [ ] and [ ] had expired training
10. Communicable Disease – child care staff scheduled during the hours of [ ] and [ ] had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
13. Child Abuse – child care staff scheduled during the hours of 6:00 am- 8:00 am had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/23/2022

#### **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) 4, 5, 6 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: 12/23/2022

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

Corrective Action Plan Due: 12/23/2022

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

Corrective Action Plan Due: 12/23/2022

**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, 6, 7, 10, 13 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.

### Rules In-Compliance/Not Verified

| 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 Requirements                          | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Building Department Inspection                   | Compliant |   |
| 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 Requirements                  | Compliant | Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: Hamilton Co. Level II VWAR-CHKL4 |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator Qualifications                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Written Program Policies and Procedures          | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Medical Statement                                | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check Requirements                    | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-10 Professional Development Requirements            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space Requirements                        | Compliant |   |



| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-12-11 Separation of Children Under 2 1/2 Years    | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Space Requirements                  | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment                      | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free Environment                      | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills                            | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of Communicable Disease          | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury Reporting                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule                              | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and Equipment                     | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play                          | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity                            | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |



|   |           |   |
|---|-----------|---|
| Rule: 5101:2-12-18 Ratio                | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding staff/child ratios were discussed. |
| 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 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   |
| 5101:2-12-22 Fluid Milk Requirements    | Compliant |   |
| Rule                                    | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Safe Food Handling/Storage | Compliant |   |