



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 little Avengers Academy, LLC | Program Number 2220026508 | Program Type Child Care Center | |
| Address 8905 mt. vernon road st louisville OH 43071 | | | County LICKING |
| Building Approval Date 07/13/2004 | Use Group/Code E | Occupancy Limit | Maximum Under 2 ½ |
| Fire Inspection Approval Date 03/09/2022 | Food Service Risk Level Level II | | |

| Inspection Information | | |
|--------------------------------|--------------------------|----------------------------------|
| Inspection Type Provisional | Inspection Scope Full | Inspection Notice Unannounced |
| Inspection Date 03/20/2023 | Begin Time 10:30 AM | End Time 2:30 PM |
| Inspection Date 03/21/2023 | Begin Time 9:00 AM | End Time 11:00 AM |
| Reviewer: Darcie Schofield | | |
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| Summary of Findings | | | | |
|--------------------------|--------------------------------------|-----------------------|------------------------|--------------------|
| No. Rules Verified 58 | No. Rules with Non-compliances 18 | No. Serious Risk 0 | No. Moderate Risk 3 | No. Low Risk 23 |

| 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) | | 14 | 7 | 21 |
| Young Toddler | | 3 | 0 | 3 |
| Total Under 2 ½ Years | 80 | 17 | 7 | 24 |
| Older Toddler | | 9 | 4 | 13 |
| Preschool | | 21 | 5 | 26 |
| School Age | | 0 | 22 | 22 |



| | | | | |
|----------------------------------|-----|----|----|----|
| Total Capacity/Enrollment | 114 | 30 | 31 | 85 |
|----------------------------------|-----|----|----|----|

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--------------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Infants | 0 to < 12 months | 2 to 9 | |
| Infants | 0 to < 12 months | 2 to 8 | |
| older infants/young toddlers | 18 months to < 30 months | 1 to 6 | |
| older infants/young toddlers | 12 months to < 18 months | 1 to 5 | |
| Toddlers | 30 months to < 36 months | 2 to 13 | |
| Toddlers | 30 months to < 36 months | 2 to 12 | |
| Preschool | 3 years to < 4 years | 2 to 18 | |
| Preschool | 3 years to < 4 years | 2 to 16 | |
| School Age | School-Age to < 11 years | 1 to 0 | |

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: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals and machinery in a place that is inaccessible to children. The program is required to provide an outdoor play area away from machinery in operation.

Finding: During the inspection, a potentially hazardous item or toxic substance was used or stored in the Toddler and Preschool classrooms where children had access to it, as noted in number 2 below.



1. Bleach.
2. Cleaning agent (floor cleaner stored under the sink in Toddlers where the child lock was broken allowing access; cleaning/sanitizing spray in reach in the Preschool room as gate was left open to the food service area and cleaning supplies were present).
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.
6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.
14. Other potentially hazardous substance, equipment or machinery: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

Domain: 08 Staff Files

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

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

Finding: During the inspection, it was determined that individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file as required. Submit the program's corrective action plan, which includes a statement that the approval is now on file or the individual(s) are no longer engaged in assigned duties and are not near children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

Domain: 08 Staff Files



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

Code: The program is required to have all staff request background checks as required.

Finding: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number 1 below:

1. Submitting the request for a background check for child care in the OPR.
2. Submitting fingerprints electronically according to the process established by BCI.

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

Corrective Action Plan Due: 04/20/2023

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-04 Fire Inspection

Code: The program is required to obtain a fire inspection within 12 months from the date of the last fire inspection without any uncorrected violations.

Finding: During the inspection, it was determined the program had not been inspected by the local fire department or local fire safety inspector and secured documentation of a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection without any uncorrected violations, as required. The program had requested the new inspection at least 30 days prior to the expiration date of the previous fire inspection. Submit the program's corrective action plan, which includes an updated fire inspection without any uncorrected violations, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Daily Schedule



Code: The program is required to have the daily program schedule posted in all required areas.

Finding: During the inspection, it was determined that a copy of the daily program schedule was not posted in the Infant, older infant, preschool and school age classrooms and in the Pre-K area as required.

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

Corrective Action Plan Due: 04/20/2023

Domain: 03 Postings & Equipment

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

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

Finding: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in numbers 1 and 2 below:

1. The plan was not posted in each classroom (infants, older infants and preschool)
2. The plan was not posted in other spaces used by children (PreK learning area).
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: 04/20/2023

Domain: 03 Postings & Equipment



Rule: 5101:2-12-17 Materials and Equipment

Code: The program is required to have enough equipment for all children in care.

Finding: During the inspection, it was determined that equipment and materials in the following categories 1, 4, and 10 were not provided in sufficient quantities for children in the older infant (ages 12 months-30 months) classroom, as required by the rule:

1. Art supplies;
2. Manipulative materials and equipment;
3. Blocks;
4. Science-nature equipment;
5. Language arts and auditory materials and equipment;
6. Pretend or dramatic play materials;
7. Music equipment;
8. Transportation materials and equipment;
9. Gross motor equipment;
10. Sensory motor equipment.

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

Corrective Action Plan Due: 04/20/2023

Domain: 05 Health & Safety

Rule: 5101:2-12-22 Fluid Milk Requirements

Code: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

Finding: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number 4 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.



5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate 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: 04/26/2023

Domain: 05 Health & Safety

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

Code: The program is required to refrain from using televisions, computers, and other screens during meals and snacks.

Finding: During the inspection it was determined that television was on during lunch in the preschool classroom. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

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 7 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).

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

Corrective Action Plan Due: 04/26/2023

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 numbers 1 and 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.

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

Corrective Action Plan Due: 04/20/2023

Domain: 07 Diapering & Infant Care



Rule: 5101:2-12-20 Cribs

Code: The program is required to refrain from storing materials and equipment in cribs.

Finding: During the inspection, it was determined that a crib, assigned to a child, was used for storage. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

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 breast milk/formula were not labeled with the child's name and date of preparation, (and date express for breast milk). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to label all cribs.

Finding: During the inspection, it was determined that at least one crib was not labeled with the child's name, 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: 04/20/2023

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 numbers 1, 2, and 3 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: 04/20/2023

Domain: 08 Staff Files

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

Code: The program is required to have staff complete the online staff orientation training.

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in numbers 1 and 2 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: 04/20/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements



Code: The program staff is required to maintain career-technical program education information on file at the program.

Finding: In review of the staff records, it was determined that documentation was incomplete for the career-technical or CDA program high school student(s) listed on the Employee Record Chart. Submit the program's corrective action plan, which includes a copy of the documentation for the vocational student, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program or in the Ohio Professional Registry.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023



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 numbers 5, 7 and 8 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: At least one individual had been assigned to the program but was not yet employed with 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: 04/20/2023

Domain: 08 Staff Files

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

Code: The program is required to have the current rules available in a noticeable area.

Finding: During the inspection, it was determined the current licensing rules were not available or available in a noticeable area on the premises. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023



Domain: 08 Staff Files

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

Code: The program administrator is required to have hours of availability to meet with parents and have the hours posted in a noticeable location.

Finding: During the inspection, it was determined that the administrator did not have scheduled hours of availability to meet with parents, or the hours of availability were not posted in a noticeable location. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

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 9 and 14 below.

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

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

Corrective Action Plan Due: 04/20/2023



Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

Code: The program is required to store medical foods and topical products out of the reach of children.

Finding: During the inspection, it was determined that a medical food or topical product, (diaper creams), were within the reach of children in the infant rooms. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/20/2023

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: 04/20/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file at the program for each child enrolled.

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in numbers 1, 2, and 10 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth



4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed.
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions (parent's signature on child medical form)
11. Other []

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

Corrective Action Plan Due: 04/20/2023

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|--|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-02 Current Information | Compliant | Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS). |
| Rule | Status | Documenting Statement(s), If applicable |



| | | |
|--|---------------|--|
| 5101:2-12-03 Inspection Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department 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: #TMUY-CGNHB9, Expiration 3/1/24. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Administrator Qualifications | Compliant | Documenting Statement: The administrator has until May 16, 2023 to complete the rules review course, part 1 and part 2. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program Policies and Procedures | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Professional Development Requirements | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding professional development training for administrators and child care staff members were discussed. |
| 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 |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement: Outdoor equipment was viewed to be safe and |



| | | free of rust, sharp points, and other hazards. |
|---|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play Fall Zones | Compliant | Documenting Statement: The protective material used under outdoor equipment was pea gravel. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Safe Equipment | Compliant | Documenting Statement: Equipment was observed to be in good condition. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: During the inspection, the equipment was observed clean and in good repair. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free Environment | Compliant | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical Care Plans | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding caring for children with health conditions were discussed. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement: The JFS 08087 "Communicable Disease Chart" was |



| | | posted and was readily available to staff and parents. |
|--|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury Reporting | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | 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: Staff/child ratios observed during the inspection were in compliance. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance Records | Compliant | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times. |
| Rule: 5101:2-12-18 Attendance Records | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding attendance records were discussed. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-12-19 Child Guidance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food Handling/Storage | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: Appropriate daily written records for all infants were viewed. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet Training | Compliant | |