

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 Deta	ils	
Program Name	Program Number		Program Type
The Learning Nest Preschool	2220026777		Child Care Center
Address			County
2878 Maysville Pike Zanesville			MUSKINGUM
OH 43701			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
08/19/2022	E	49	5
Fire Inspection Approval Date	Food Service Risk Level		
08/22/2022	Exempt		

Inspection Information					
Inspection Type		Inspection So	оре	Inspection Notice	
Pre-license		Full		Unannounced	
Inspection Date 09/06/2022		Begin Time 1	1:05 AM	End Time 2:00 PM	
Inspection Date 09/06/2022		Begin Time 3	:30 PM	End Time 4:15 PM	
Reviewer: SARENA POWHIDA					
Reviewer: SARENA POWHIDA					
Summary of Findings					
No. Rules Verified	No. Rules with Non-c	ompliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	2		0	1	2

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)		0	0	0	
Young Toddler		0	0	0	
Total Under 2 ½ Years		0	0	0	
Older Toddler		0	0	0	
Preschool		0	0	0	
School Age		0	0	0	



Total Capacity/Enrollment	0	0	0

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

Summary of Non-Compliances

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

Serious Risk Non-C	ompliances
No Serious Risk Non-Compliances were observed during this	inspection
140 Serious Risk Horr-compliances were observed during this	inspection

Moderate Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide adequate fall surface for the outdoor play space.

<u>Finding</u>: During the inspection, it was determined that the off-site playground did not have adequate fall surface under and around equipment as noted in number(s) 1 below:

- 1. No fall surface (airplane, small climber and small slides)
- 2. Adequate fall surface to soften the impact of a fall
- 3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone
- 4. Other []

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/06/2022

Low Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

<u>Code</u>: The program is required to provide fall zones around equipment to prevent injury if a child were to fall.

<u>Finding</u>: During the inspection, it was determined that the large climber/swings and the small climber, slides and airplane on the off-site playground were positioned such that the fall zone requirement in number(s) 2, 4, and 6 below was not met:

- 1. The fall zone was less than 3 feet from the fence for equipment used by children 23 months of age and younger.
- 2. The fall zone was less than 6 feet from the fence for equipment used by children 24 months of age and older.
- 3. There was not a fall zone of 3 feet in all directions from the perimeter of the equipment used by children 23 months of age and younger.
- 4. There was not a fall zone of 6 feet in all directions from the perimeter of the equipment used by children 24 months of age and older.
- 5. The fall zone was less than 4 1/2 feet from each piece of applicable equipment used by children 23 months of age and younger.
- 6. The fall zone was less than 9 feet from each piece of applicable equipment used by children 24 months of age and older.
- 7. Other [].

The program is required to provide equipment that is safe with adequate fall zones. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/06/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

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

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 3 a and c and 4 a:

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test
- a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/06/2022

5101:2-12-02 Current Information

Rules In-Compliance/Not Verified

	20	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable

Compliant

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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-03 Inspection	Compliant	Documenting Statement: During the
Requirements		inspection, the requirements of the rule
		regarding compliance inspections were
		discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department	Compliant	
Inspection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The program
Requirements		has obtained a food service exemption
		status from the local health department.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-05 Denial, Revocation and	Compliant	
Suspension		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
Rule	Status	Decumenting Statement/s) If applicable
5101:2-12-07 Administrator	Compliant	Documenting Statement(s), If applicable
Responsibilities/Requirements	Compliant	
Responsibilities/Requirements	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	bocumenting statement(s), ii applicable
Policies and Procedures	Compliant	
Tolicies and Frocedures		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-08 Child Care Staff	Compliant	Documenting Statement: All Child Care
Member Educational Requirements	Compilant	Staff Members had verification of
Michibel Educational Nequilements		educational requirements on file at the
		•
		program.
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	Boodineriting Statement(s), it applicable
Whistle Blower Protection	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-09 Background Check	Compliant	Documenting Statement: During the
Requirements		inspection, the required documentation
, and the same of		regarding background checks was on file
		for all employees listed.
		Tot all employees listed!
	1	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Health Training	Compliant	Documenting Statement: The program
Requirements		had at least one Child Care Staff Member
		with currently valid training in First Aid,
		Management of Communicable Disease,
		CPR, and Child Abuse Prevention present
		and readily accessible during all hours of
		operation.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	Documenting Statement(s), if applicable
	Compliant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children	Compliant	
Under 2 1/2 Years		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space	Compliant	Documenting Statement: During the
Requirements		inspection, the requirements of the rule
		regarding outdoor space were discussed.
		The prescribed playground inspection
		form was discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	Dodamenting Statement(3), it applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-12 Safe Equipment	Compliant	Documenting Statement: During the
		inspection, the requirements of the rule
		regarding safe equipment were discussed.
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Rule	Status	Documenting Statement(s), If applicable

Rule: 5101:2-12-12 Safe Environment	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding safe environment were discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Handwashing	Compliant	Documenting Statement: During the
Requirements	Compilant	inspection, the requirements of the rule
Requirements		regarding handwashing were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Smoke Free	Compliant	Documenting Statement: A notice was
Environment		observed posted stating that smoking is
		prohibited at the program.
	2	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and	Compliant	Documenting Statement: The program
Field Trip Procedures		uses the ODJFS sample trip permission
		form for routine trips (to off-site
		playground) to secure written permission
		from parents or guardians.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and	Compliant	Documenting Statement: During the
Enrollment Records		inspection, the requirements of the rule
		regarding children's medical statements
		and enrollments forms were discussed.
Pula	Chatus	Designation Chatagoritis If a will a late
Rule Pulo F101/2 12 15 Modical/Physical	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: During the
Care rialis		inspection, the requirements of the rule
		regarding caring for children with a
		specific health condition were discussed.
P. I.	Charter	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental,	Compliant	Documenting Statement: On the day of
and General Emergency Plan		the inspection, the complete prescribed
		JFS 01242 "Medical, Dental, and General



		Emergency Plan For Child Care" were posted in the program as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding emergency drills were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding first aid kits and standard precaution procedures were discussed.
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding management of communicable diseases were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.
Rule: 5101:2-12-17 Daily Schedule	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Daily schedules were observed posted.
Dula	Chatus	Degram outing Chat-weath Vife and Health
Rule: 5101:2-12-17 Materials and Equipment	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Sufficient equipment was observed in all categories.



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	
		15
Rule: 5101:2-12-18 Ratio	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.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: During the
'	,	inspection, the requirements of the rule
		regarding group size were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Attendance	Compliant	Documenting Statement: During the
Records		inspection, the requirements of the rule
		regarding attendance records were
		discussed.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: During the inspection, the requirements of the rule
		regarding supervision of children were
		discussed.
		discussed.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Child Guidance	Compliant	Documenting Statement: During the
		inspection, the requirements of the rule
		regarding child guidance were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: During the
		inspection, the requirements of the rule
		regarding sleeping and napping were
		discussed.
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Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding meals and snacks were discussed. Meals and snacks will be parent provided.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
	*	*
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication	Compliant	
Administration		