

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

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Provisional | Full | | Unannounced | |
| Inspection Date | Begin Time 9 | :40 AM | End Time 12:11 PM | |
| 04/21/2023 | | | | |
| Reviewer: | | | | |
| SARENA POWHIDA | A | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 57 | 6 | 0 | 0 | 7 |

| License Capacity and Enrollment at the Time of Inspection | | | | |
|---|------------------|------------|-----------|---------|
| Age Group | License Capacity | Enrollment | | ollment |
| | 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 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 15 | 0 | 15 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 49 | 15 | 0 | 15 |

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



| Preschool | 3 years to < 4 years | 2 to 11 | |
|-----------|----------------------|---------|----------------|
| Preschool | 3 years to < 4 years | 2 to 8 | Extended care. |

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 |
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| No Serious Risk Non-Compliances were observed during this inspection |
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| Moderate Risk Non-Compliances |
| No Moderate Risk Non-Compliances were observed during this inspection |
| No Moderate Misk Non compliances were observed during this hispection |
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| Low Risk Non-Compliances |
| Low mak fron-compliances |

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed in that one child had not been signed-in upon arrival.
- 3. The original attendance documentation was not kept at the program for a period of one year.

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: 05/21/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

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

Corrective Action Plan Due: 05/21/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

<u>Finding</u>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 5 below:

- 1. Open pull cords that are not closed loop.
- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 4. Stacked chairs.
- 5. Employee(s) purse(s). (low shelf next to desk in extended care room)
- 6. Diaper bags.
- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [].
- 12. Other [].

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

Corrective Action Plan Due: 05/21/2023

Domain: 05 Health & Safety

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

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

<u>Finding</u>: During the inspection, it was determined that the preschool group was served hotdogs cut into round pieces, which posed a choking hazard. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 05/21/2023

Domain: 05 Health & Safety

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

<u>Code</u>: The program is required to have the appropriate number of first aid kits for the program.

<u>Finding</u>: During the inspection, it was determined that the first aid supplies were not stored according to the requirements listed in item number(s) 3 below:

- 1. Stored in a clearly marked container.
- 2. Stored in an unlocked container.
- 3. Stored out of the reach of children (small black kit in extended care room).
- 4. In each building.
- 5. On each floor.
- 6 For every 75 children in attendance.

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

Corrective Action Plan Due: 05/21/2023

Domain: 08 Staff Files

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

Code: The program staff is required to have a letter from the school district if they studied at home.

<u>Finding</u>: In review of the staff records, it was determined that the child care staff member(s) listed on the Employee Record Chart, who had completed a course of home school education, did not have on file a letter from the district in which the student resides indicating the student was excused from attendance during the final year of home education. Submit the program's corrective action plan, which includes a copy of the letter, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/21/2023

Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 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 in that the staff member did not have verification of exemption.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire in that the staff member did not have verification of exemption.
- 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: 05/21/2023

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| 5101:2-12-02 License Posted | Compliant | |
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| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | |
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| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | | |
| 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 | |
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| Rule | Status | Documenting Statement(s), If applicable |

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| 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. |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-05 Denial, Revocation and | Compliant | <u> </u> |
| Suspension | | |
| Suspension | <u> </u> | |
| Dulo | Ctatus | Decumenting Statement(s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Qualifications | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| · · · | | 1 |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: No changes |
| | Compilant | |
| Policies and Procedures | | have been made to the written policies |
| | | and procedures since it was last approved |
| | | by this Department. |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement | | |
| 110.110 | Status Compliant | Documenting Statement: All employees |
| 110.110 | | |
| 110.110 | | Documenting Statement: All employees |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees had current medical statements on file. |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & | Compliant | Documenting Statement: All employees had current medical statements on file. |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees had current medical statements on file. |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule | Compliant | Documenting Statement: All employees had current medical statements on file. |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule | Status Compliant Status Status | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule Rule: 5101:2-12-09 Background Check | Status Compliant Status Status | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule Rule: 5101:2-12-09 Background Check | Status Compliant Status Status | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule Rule: 5101:2-12-09 Background Check | Status Compliant Status Status | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule Rule: 5101:2-12-09 Background Check | Status Compliant Status Status | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements | Status Compliant Status Compliant Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements | Status Compliant Status Compliant Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements Rule 5101:2-12-10 Professional | Status Compliant Status Compliant Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements | Status Compliant Status Compliant Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements Rule 5101:2-12-10 Professional | Status Compliant Status Compliant Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements Rule 5101:2-12-10 Professional | Status Compliant Status Compliant Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements Rule 5101:2-12-10 Professional Development Requirements | Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. Documenting Statement(s), If applicable |
| Rule S101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements Rule 5101:2-12-10 Professional Development Requirements Rule 5101:2-12-11 Indoor Space | Status Compliant Status Compliant Status Compliant Status Status Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection Rule Rule: 5101:2-12-09 Background Check Requirements Rule 5101:2-12-10 Professional Development Requirements Rule Rule | Status Compliant Status Compliant Status Compliant Status Status Status Compliant | Documenting Statement: All employees had current medical statements on file. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. Documenting Statement(s), If applicable |

| Rule | Status | Documenting Statement(s), If applicable |
|--|-------------|--|
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | Compilation | playground inspections were completed |
| The quite state of the state of | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 1/6/23. |
| | | 1,0,23. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | Bocamenting statement(3), ii applicable |
| 3101.2 12 11 Outdoor ridy rail 2011cs | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Compliant | , , , , , , , , , , , , , , , , , , , |
| Environment | · | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| | I c | |
| 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. |
| | | profibited at the program. |
| | I | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | | the inspection, 25% of the children's |
| | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| D 1 5404 2 42 45 01 11 12 11 1 | Caradian | B |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: In review of |
| Enrollment Records | | 25% of the records, at the time of the |
| | | inspection, children's medical statements |
| | | were complete and on file, as required by the rule. |
| | | the rule. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |

| Dulay F101/2 12 15 Madical/Dhysical | Commissions | Decumenting Statement, At the time of |
|-------------------------------------|-------------|---|
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: At the time of |
| Care Plans | | the inspection, there were no children |
| | | currently enrolled who had health |
| | | conditions. |
| | | |
| | | |
| 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. |
| | | posted in the program as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| The state is to emergency brills | - Comphant | for completed fire, weather, and |
| | | · · |
| | | emergency/lockdown drills was verified |
| | | during this inspection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | | Bocumenting Statement(3), if applicable |
| · I | Compliant | |
| Communicable Disease | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | Bocumenting Statement(3), if applicable |
| | Compliant | |
| Reporting | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | Bocamenting statement(3), if applicable |
| 3101.2-12-10 Willien Disaster Flam | Compliant | |
| <u> </u> | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| | | |
| | T | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | | equipment was observed in all categories. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| L | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | Documenting Statement(3), it applicable |
| J101.2-12-16 License Capacity | Compliant | |
| 1 | İ | |

| Rule | Status | Documenting Statement(s), If applicable |
|-----------------------------------|--------------|---|
| 5101:2-12-18 Ratio | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting statement(s), it 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 |
| 5101:2-12-20 Cots and Napping | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | | Documenting Statement(s), it applicable |
| Handling/Storage | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Not Verified | bocumenting statement(s), it applicable |
| Training | NOC VCITIEU | |
| Trailing | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | - | |