

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 | Program Number | | Program Type | |
| Glass City Childcare | 2220027001 | | Child Care Center | |
| | | | | |
| Address | | | County | |
| 3006 Monroe Toledo | | | LUCAS | |
| ОН | | | | |
| 43606 | | | | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 02/21/2023 | E | 72 | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | |
| 09/12/2022 | Level III | | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Follow-up | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 01/13/2025 | 12:35 PM | | 3:25 PM | |
| Reviewer: | | | | |
| Beverly Sutter | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 59 | 4 | 0 | 0 | 4 |

| 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) | | 12 | 0 | 12 |
| Young Toddler | | 14 | 0 | 14 |
| Total Under 2 ½ Years | 43 | 26 | 0 | 26 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 31 | 0 | 31 |
| School Age | | 66 | 0 | 66 |
| Total Capacity/Enrollment | 63 | 97 | 0 | 123 |

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



| Infant | 0 to < 12 months | 1 to 4 | |
|-------------|--------------------------|---------|------------------------------------|
| Infant | 0 to < 12 months | 1 to 4 | |
| Toddlers | 18 months to < 30 months | 2 to 10 | |
| Toddlers | 18 months to < 30 months | 2 to 9 | |
| Preschool 1 | 3 years to < 4 years | 1 to 7 | Preschool 1 and 2 combined for nap |
| Preschool 1 | 3 years to < 4 years | 2 to 15 | |
| Preschool 1 | 3 years to < 4 years | 2 to 15 | Combined PS 1 and 2. |
| Preschool 2 | 4 years to < 5 years | 1 to 8 | Preschool 1 and 2 combined |
| School Age | School-Age to < 11 years | 1 to 6 | |

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 | | |
|---|--|--|
| No Moderate Risk Non-Compliances were observed during this inspection | | |
| The medicate make the management and make the map the | | |
| | | |
| | | |
| | | |
| | | |



Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-13 Handwashing Requirements

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

<u>Finding</u>: During the inspection, it was determined that handwashing requirements were not followed as listed in number 5 below, as required in rule.

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

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

Corrective Action Plan Due: 02/12/2025

Domain: 04 Indoor/Outdoor Space



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

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

<u>Finding</u>: During the inspection, it was determined that outdoor play equipment was unsafe or not used as intended as noted in number 20 below:

- 1. There was rust exposed.
- 2. There were protruding bolts.
- 3. There were cracks.
- 4. There were holes.
- 5. There was splintering wood.
- 6. There were sharp edges or points.
- 7. There were lead hazards.
- 8. There were toxic substances.
- 9. There were tripping hazards.
- 10. There was chipped and/or peeling paint.
- 11. The sandbox was not covered when the program was closed or during non-daylight hours.
- 12. Outdoor equipment, [] was not developmentally appropriate.
- 13. Outdoor equipment, [], was placed in the main traffic pattern.
- 14. Outdoor play equipment, [], was positioned too closely together, posing a risk of injury if a child were to fall from one piece of equipment into another.
- 15. Outdoor equipment, [], was not securely anchored but did not present a risk of imminent danger of the structure collapsing when children are using the equipment
- 16. Outdoor equipment, [], was 30 inches or more from the ground and did not have a protective barrier that would prevent a child from falling off this piece of equipment.
- 17. The manufacturer's guidelines for assembly and installation were not followed for the [].
- 18. Functionally linked equipment was used by preschool-age children and the distance between two adjacent pieces of equipment exceeded 12 inches.
- 19. Functionally linked equipment was used by school-age children and the distance between two adjacent pieces of equipment exceeded 18 inches.
- 20. Other: outdoor toy disassembled in play area.

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

Corrective Action Plan Due: 02/12/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.



<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 5a below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies 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);
- 6. Tuberculosis (TB) screening/test information was missing:
- 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 6a.
- 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: 02/12/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Child Medical and Enrollment Records

 $\underline{\text{Code}}$: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

<u>Finding</u>: 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 numbers 2, 4, 5, 8 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 |
|-----------------------------------|-----------|--|
| Rule: 5180:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as |
| | | required. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 Building | Compliant | Documenting Statement: A copy of the |
| Department Inspection | | certificate of occupancy was available on- |
| | | site for review. |
| Rule: 5180:2-12-04 Building | Compliant | Documenting Statement: On the day of |
| Department Inspection | | the inspection, the program was |
| | | operating in compliance with the current |
| | | building approval(s). |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |



| Rule: 5180:2-12-04 Building | Compliant | Documenting Statement: A copy of the |
|--|--|--|
| Department Inspection | | certificate of occupancy was available on- |
| | | site for review. |
| | | |
| Rule: 5180:2-12-04 Building | Compliant | Documenting Statement: On the day of |
| | Compliant | |
| Department Inspection | | the inspection, the program was |
| | | operating in compliance with the current |
| | | building approval(s). |
| | | |
| , | i | · |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-02 Current | Compliant | Documenting Statement: The program |
| Information | Compilant | had current information entered in the |
| Information | | |
| | | Ohio Child Licensing and Quality System |
| | | (OCLQS). |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-03 Inspection | Compliant | |
| Requirements | *** | |
| 4 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 Fire Inspection | Compliant | Documenting Statement: Please Note: |
| Naic. 5100.2 12 041 iic iiispection | Compilant | Documentation of a fire inspection |
| | | |
| | | without any uncorrected violations must |
| | | be secured for the program. Secure a |
| | | new fire inspection by 8-12-25. |
| | | |
| | \$ | 2 |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 Food Service | Compliant | Documenting Statement: The food service |
| Requirements | | license was observed posted. Following is |
| Requirements | | |
| | | the audit number and date of expiration: |
| | | KROH-D4MQVJ, March 1, 2025. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-07 Administrator | Compliant | Documenting Statement: The |
| Qualifications | D' | administrator has completed the rules |
| ************************************** | | review course. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 1000000000 | A STATE OF THE STA | |
| Rule: 5180:2-12-07 Administrator | Compliant | Documenting Statement: The |
| Responsibilities/Requirements | | administrator's hours of availability to |
| | | meet with parents were posted in a |
| | | noticeable location. |
| | | Adjusted information person person active again. Settleman (PASSA) |
| | | |



| Rule: 5180:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The administrator's posted hours of availability reflected an appropriate schedule meeting rule compliance. |
|--|---------------------|--|
| Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection | Compliant | Documenting Statement: On the day of the inspection, all child care staff members had met orientation training requirements. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-09 Background Check Requirements | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule | Status | Decimanting Chatamantial If applicable |
| Rule: 5180:2-12-10 Health Training Requirements | Compliant | Documenting Statement(s), If applicable Documenting Statement: The program 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 5180:2-12-11 Indoor Space Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5180:2-12-11 Separation of Children Under 2 1/2 Years | Status Compliant | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-11 Outdoor Space Requirements | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: Adequate bathroom access is provided during outdoor play by means of extra staff. |



| Rule: 5180:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence. |
|--|-----------|--|
| Rule: 5180:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 1-7-25. |

| Rule | Status | Documenting Statement(s), If applicable |
|-----------------------------------|-----------|--|
| Rule: 5180:2-12-12 Safe Equipment | Compliant | Documenting Statement: Equipment was observed to be in good condition. |

| Rule | Status | Documenting Statement(s), If applicable |
|-------------------------------------|-----------|---|
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: Cleaning supplies were viewed stored out of the reach of children. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: All electrical outlets were covered with safety receptacles. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: All area rugs had nonskid backing. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: The indoor temperature of the program during the inspection was comfortable and met rule compliance. |

| Rule | Status | Documenting Statement(s), If applicable |
|-----------------------------|-----------|--|
| Rule: 5180:2-12-13 Sanitary | Compliant | Documenting Statement: During the |
| Equipment and Environment | | inspection, it was discussed that blankets |
| | | were washed weekly. |
| | | |
| Rule: 5180:2-12-13 Sanitary | Compliant | Documenting Statement: On the day of |
| Equipment and Environment | | the inspection, the program provided a |
| | | clean environment in accordance with |



| ~~ | | |
|--|-----------------------------------|--|
| | | Appendix A of this rule, which included the furniture, materials and equipment. |
| Rule: 5180:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: Cots were cleaned and sanitized. |
| Rule: 5180:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: During the inspection, the equipment was observed clean and in good repair. |
| Rule: 5180:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: Trash was stored and emptied daily. |
| 0.1 | | D C |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-13 Smoke Free | Compliant | Documenting Statement: No smoking was |
| Environment | | allowed on the premises, and the notice |
| | | stating that smoking is prohibited was |
| | | observed posted in a conspicuous place. |
| | l. | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-14 Transportation - | Compliant | Documenting Statement: The driver(s) |
| Driver Requirements | | had completed the required ODJFS driver |
| | | training. |
| | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-14 Transportation and | Compliant | Documenting Statement: The driver(s) |
| Field Trip Procedures | | had current and valid training in first aid, |
| | | management of communicable disease, and CPR. |
| Rule: 5180:2-12-14 Transportation and | Compliant | Documenting Statement: The program |
| Field Trip Procedures | overviolater 2.1 In ex50968.20411 | uses the ODJFS sample trip permission |
| | | form for routine trips to secure written |
| | | permission from parents or guardians. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-14 Transportation - | Compliant | Documenting Statement: An annual |
| Vehicle Requirements | | safety check of the vehicle(s), using the |
| a massade weed mystymenter | | JFS 01230 "Vehicle Inspection Report For |
| | | Child Care Centers" form, was verified |
| | | and dated 9-7-24 |
| Pulor 5190-2 12 14 Transmortation | Compliant | Decumenting Statement: The webist-/-\ |
| Rule: 5180:2-12-14 Transportation - | Compliant | Documenting Statement: The vehicle(s) |
| Vehicle Requirements | | used by the program to transport children |



| | - #: | |
|---|-----------|--|
| | | is inspected and licensed by the Ohio State Highway Patrol. |
| Rule: 5180:2-12-14 Transportation - Vehicle Requirements | Compliant | Documenting Statement: During the inspection, weekly safety inspections and/or monthly emergency exiting drills were completed and documented, as required using the ODJFS sample form |
| | K | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-15 Medical/Physical Care Plans | Compliant | Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-16 Medical, Dental, | Compliant | Documenting Statement: On the day of |
| and General Emergency Plan | Compilant | 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: 5180:2-12-16 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: 5180:2-12-16 Incident/Injury Reporting | Compliant | Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required. |
| Rule: 5180:2-12-16 Incident/Injury Reporting | Compliant | Documenting Statement: The requirements for completing JFS 01299 "Incident/Injury Report For Child Care" reports were discussed during the inspection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-16 First Aid/Standard Precautions | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required. |
| - | | A CONTROL OF THE CONT |



| Rule | Status | Documenting Statement(s), If applicable |
|-------------------------------------|-----------|--|
| Rule: 5180:2-12-16 Management of | Compliant | Documenting Statement: The JFS 08087 |
| Communicable Disease | , | "Communicable Disease Chart" was |
| | | posted and was readily available to staff |
| | | and parents. |
| | | · ' |
| Rule: 5180:2-12-16 Management of | Compliant | Documenting Statement: The program |
| Communicable Disease | 1 | staff stated parents were informed when |
| | | their child had any exposure to a |
| | | contagious illness by number 5 below: |
| | | contagned immedial mainiber of continu |
| | | 1. A posted notice; |
| | | 2. Verbal communication; |
| | | 3. A written notice sent home; |
| | | 4. A note posted on the classroom door; |
| | | 5. Other: electronic-Class Dojo |
| | | 5. Other cicculonic-class bojo |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | | equipment was observed in all categories. |
| qarpris.is | | equipment trace cases to a milian case gention |
| | | • |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-18 License Capacity | Compliant | Documenting Statement: The program |
| | | was operating within their license |
| | | capacity limits. |
| | | |
| | F | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-18 Ratio | Compliant | Documenting Statement: The Appendix A |
| | | "Staff/Child Ratios, Age Grouping and |
| | | Maximum Group Size" was posted in a |
| | | noticeable area at the program as |
| | | required. |
| | | |
| Rule: 5180:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | | ratios observed during the inspection |
| | | were in compliance. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| | | were observed posted. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |



| Rule: 5180:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding daily outdoor play were discussed. |
|--|--------------------|---|
| | | |
| Rule: 5180:2-12-18 Group Size | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The group sizes observed on the day of the inspection were in compliance. |
| | | |
| Rule: 5180:2-12-18 Attendance Records | Compliant | Documenting Statement(s), If applicable Documenting Statement: Child Care Staff Members were observed recording the attendance for each child upon arrival and documenting each child's departure. |
| Rule: 5180:2-12-18 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 | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-20 Cots and Napping | Compliant | Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children. |
| Rule: 5180:2-12-20 Cots and Napping | Compliant | Documenting Statement: Cots were placed appropriately and safely during nap time. |
| Rule: 5180:2-12-20 Cots and Napping | Compliant | Documenting Statement: The cots were disinfected daily. |
| | | |
| Rule: 5180:2-12-19 Child Guidance | Compliant | Documenting Statement(s), If applicable Documenting Statement: Appropriate child guidance techniques and practices were observed being used during the inspection. |
| Rule | Status | Documenting Statement(s), If applicable |



| Rule: 5180:2-12-19 Supervision | Compliant | Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group. |
|---|---------------------|---|
| Rule: 5180:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed. |
| Rule: 5180:2-12-19 Supervision | Compliant | Documenting Statement: During the inspection, child care staff were observed assisting children throughout the day. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-22 Fluid Milk | Compliant | Documenting Statement: During the |
| Requirements | Compliant | inspection, the requirements of the rule regarding fluid milk were discussed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were placed 2 feet apart. |
| Rule: 5180:2-12-20 Cribs | Compliant | Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier. |
| Rule: 5180:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were labeled with the assigned infant's name. |
| PJ- | Chahara | Decomposition Chateron and (a) If a multiplia |
| Rule: 5180:2-12-21 Evening and | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The written |
| Overnight Care | Compliant | security plan was reviewed. |
| Rule: 5180:2-12-21 Evening and Overnight Care | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding evening and overnight care were discussed. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Posted menus were current and dated. |
| Rule: 5180:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: The menu was posted. |



| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|--|
| Rule: 5180:2-12-22 Safe Food | Compliant | Documenting Statement: Food was stored |
| Handling/Storage | Compilant | in a safe and sanitary manner. |
| Tranding/Storage | | ill a sale allu sallital y manner. |
| 1 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-23 Infant Daily Care | Compliant | Documenting Statement: Appropriate |
| Naic. 5100.2 12 25 illiant bany care | Compilant | daily written records for all infants were |
| | | viewed. |
| | | vieweu. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-23 Infant Bottle and | Compliant | Documenting Statement: The container |
| Food Preparation | 1 | used to heat bottles is emptied and |
| 1 | | cleaned each day. |
| | | 554.154.545.1.447. |
| Rule: 5180:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were |
| Food Preparation | | labeled as required. |
| | | , and see an inequalities. |
| Rule: 5180:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were |
| Food Preparation | I | warmed in accordance with the rule in a |
| | | bottle warmer. |
| | | |
| Rule: 5180:2-12-23 Infant Bottle and | Compliant | Documenting Statement: Bottles and |
| Food Preparation | , | opened food were stored in a refrigerator |
| | | located in the infant room. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-23 Diapering and | Compliant | Documenting Statement: Appropriate |
| Toilet Training | | diaper changing procedures were |
| | | observed during the inspection in the |
| | | infant room(s). |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-25 Medication | Compliant | Documenting Statement: There were no |
| Administration | | children on medication at the time of the |
| | | inspection; however, the method of |
| | | storage and practices for the |
| | | administration were reviewed. |
| | | |
| | | |
| | | |
| · · · · · · · · · · · · · · · · · · · | | - |