



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 Morning stars learning center 3	Program Number 2230028148	Program Type Child Care Center	
Address 1149 parsons ave Columbus OH 43206		County FRANKLIN	
Building Approval Date 10/17/2014	Use Group/Code E	Occupancy Limit 42	Maximum Under 2 ½ 21
Fire Inspection Approval Date 05/10/2023	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/02/2023	Begin Time 10:00 AM	End Time 3:00 PM
Reviewer: CRYSTAL LUSE		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 30	No. Serious Risk 0	No. Moderate Risk 6	No. Low Risk 34

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		2	0	2
Young Toddler		3	0	3
Total Under 2 ½ Years	18	5	0	5
Older Toddler		7	0	7
Preschool		5	0	5
School Age		14	0	14
Total Capacity/Enrollment	35	26	0	31

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



Infant	0 to < 12 months	1 to 5	
Infant	0 to < 12 months	1 to 5	
Toddler	0 to < 12 months	1 to 13	All groups combined- Out of Compliance
Toddler	18 months to < 30 months	1 to 5	
Toddler	18 months to < 30 months	1 to 9	Toddler/Preschool Combined- Out of Compliance
Preschool	3 years to < 4 years	1 to 4	
Preschool	30 months to < 36 months	1 to 4	

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: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Finding: During the inspection, required staff/child ratios were not maintained for different groups on multiple occasions, as noted below:

The ratio determined for the combined group of Infant through Preschool children was 1 Child Care Staff Member for 13 children. Additionally, a ratio of 1 Child Care Staff Member for 9 children was determined for the combined group on Toddler & Preschool children.



Additional staff members must be hired or current Child Care Staff Members must be rescheduled to maintain compliance. 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: 11/01/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to have a second employee present, and used based on the qualifications they meet, when seven or more children are present.

Finding: During the inspection, it was determined that the program did not meet the rule requirement as noted in number 1 below:

1. The program did not have a second employee or Child Care Staff Member present when required (there was 1 staff member and there were 13 children present);
2. The program was using a second Child Care Staff Member who was not able to meet this criteria as defined in the rule.

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

Corrective Action Plan Due: 11/01/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

Finding: During the inspection, it was determined that children were left unattended while inside the program as noted in number 2 below:

1. Child(ren) were left unattended once.
2. Children were left unattended more than once (The staff member left the Toddler room to answer the door, left the Toddler room to walk down the hallway, and left the toddler group unattended to take Infants to their classroom. The Toddler group included all age groups combined in the room).
3. Child(ren) left the group and were unattended.



4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other [].

Children must be supervised and within sight and hearing of a child care staff member at all times. 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: 11/01/2023

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation - Vehicle Requirements

Code: The program is required to use the correct vehicle type as specified in rule. The program is also required to have all vehicles used to transport children inspected by an ASE certified mechanic, FMCSA inspector or the State Highway patrol annually, and correct all repairs that are listed on the vehicle inspection report.

Finding: During the inspection, it was determined the program used a vehicle to transport children that was not approved and/or did not have a current annual vehicle inspection indicating the vehicle was mechanically safe as noted in number 2 below:

1. The program used a converted cargo van or passenger vans designed to carry ten or more passengers. The program must cease the use of this vehicle immediately.
2. The vehicle was not inspected (the program's vehicles are currently not in operation, so the program used an employee's car that has not been inspected to transport children).
3. The vehicle was inspected by someone other than an ASE certified mechanic, federal motor carrier safety administration (FMCSA) safety inspector or the Ohio State Highway Patrol.
4. The vehicle inspection was not updated annually.
5. The vehicle inspection completed from the Ohio Highway Patrol did not meet the rule requirement.
6. The annual safety check of the vehicle(s) used by the program to transport children noted repairs or corrections that had not been completed and/or documented. The safety violations need to be corrected immediately.

Submit the program's corrective action plan, which includes either discontinuing the use of the vehicle, documentation for any new vehicle now being used to transport children, or a copy of the JFS 01230 "Vehicle Inspection Report for Child Care Centers", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023



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 and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in numbers 1 & 2 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023

Domain: 08 Staff Files

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

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Finding: During the inspection, it was determined that child care staff members had sole responsibility of children in the Toddler & Preschool groups and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff members no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023



Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to keep their information current in OCLQS.

Finding: During the inspection, it was determined the information in number 4 below was not up to date in the Ohio Child Licensing and Quality System (OCLQS):

1. Mailing address
2. Telephone number
3. Email address
4. Days and hours of operation
5. Services offered
6. Name of program
7. Private pay rates

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

Corrective Action Plan Due: 11/01/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: 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.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 1 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.



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

Corrective Action Plan Due: 11/01/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

Code: The program may combine all age groups when there are twelve or fewer children in the center.

Finding: During the inspection, it was determined groups which included children less than two and one half years were combined with groups of children two and one half years and older and there were more than 12 children in the center. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

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

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number 1 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 11/01/2023



Domain: 02 Safe & Sanitary Environment

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

Code: The program is required to follow the cleaning schedule for equipment.

Finding: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number 19 below:

1. Item(s) soiled with blood or bodily fluids were not cleaned/sanitized immediately.
2. Blankets/sheets were not cleaned weekly, when soiled, or before use by another child.
3. Children's individual blankets and belongings were stored in an unsanitary manner.
4. Bottles, bottle caps, nipples and other equipment used for bottle feeding were not cleaned and sanitized in a dishwasher or by washing, rinsing, and boiling for one minute.
5. Carpets were not vacuumed weekly or cleaned when soiled.
6. Changing table/pad was not sanitized after each use or cleaned when visibly soiled.
7. Reusable cloths were not being washed daily or when visibly soiled.
8. Cots/Pads/Mats were not cleaned and sanitized before assigning to a different child, when used by a sick child, when soiled or at least every three months.
9. Cribs were not cleaned and sanitized monthly, or when soiled, or before use by another child.
10. Diaper Receptables were not cleaned and sanitized daily or more frequently as needed to eliminate odor.
11. Dishes/Cups/Silverware were not cleaned and sanitized after each use.
12. Water Containers were not labeled with the child's name, or were not cleaned and sanitized before use again on another day.
13. Dividers were not cleaned when visibly soiled.
14. Dress up clothes and hats (dramatic play) were not cleaned monthly or when soiled.
15. Floors were not cleaned weekly or when soiled.
16. The food prep area, including sinks, were not cleaned before and after preparing food (including bottle preparation) or between preparing raw or cooked food.
17. Potty chairs were not cleaned after each use, rinsed with water, cleaned and sanitized or contents were not emptied into a toilet.
18. Food tables, highchair trays were not cleaned before and after each use.
19. Tables used for play were not cleaned when visibly soiled or sanitized daily.
20. Toilet bowls were not cleaned when visibly soiled or sanitized weekly.
21. Toilet seat(s), handle(s) and hand washing sink(s) were not cleaned when visibly soiled or sanitized daily.
22. Mouthed toys were not cleaned and sanitized after each child's use.
23. Toys, other than those mouthed by children, were not cleaned monthly or when visibly soiled.
24. Washable furniture, including fabrics on infant equipment, were not cleaned weekly or when soiled.
25. Upholstered furniture was not steam cleaned when soiled.
26. Slip covers were not washed at least every six months or when soiled.
27. Wastebaskets/rinse buckets, including lids, were not being emptied daily or cleaned and sanitized when visibly soiled.
28. The manufacturer's directions for the cleaning product were not followed.
29. The solution used for sanitizing was not a commercial product registered by the United States Environmental Protection Agency as a sanitizer.
30. Other [].



Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to 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: 11/01/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals and cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.

Finding: During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was not used or stored properly as noted in number 15 below:

1. Cosmetics were accessible to children in the [] area.
2. Disinfecting wipes were accessible to children in the [] area.
3. Fish food was accessible to children in the [] area.
4. Hand lotion was accessible to children in the [] area.
5. Hand sanitizer (for children under 24 months) was accessible to children in the [] area.
6. Laundry detergent was accessible to children in the [] area.
7. Powder dish washing soap was accessible to children in the [] area.
8. Paint cans were accessible to children in the [] area.
9. White out was accessible to children in the [] area.
10. Potting Soil was accessible to children in the [] area.
11. Other potentially hazardous substance [] was accessible to children in the [] area.
12. Cleaning/sanitizing supplies had not been clearly labeled.
13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
14. A spray aerosol was used in the [] group while children were in attendance.
15. Other: Shaving cream was accessible to children in the Toddler area (it was stored on a low shelf in an unlocked cabinet).

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

Corrective Action Plan Due: 11/01/2023



Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: 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.

Finding: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number 10 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.
6. Employee(s) purse(s).
7. Diaper bags.
8. Television not securely anchored.
9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
10. Smoke detector needing batteries replaced.
11. An area rug did not have a nonskid backing.
12. An area rug presented a tripping hazard.
13. A floor surface that was unsafe in that [].
14. No platform was provided for the sink or toilet in the [] classroom.
15. The platform provided for the sink or toilet in the [] classroom was not sturdy.
16. The platform provided for the sink or toilet in the [] classroom posed a safety hazard in that [].
17. Telephone cords.
18. Staff member stepped over a barrier/gate while holding a child.
19. Emergency exits were blocked by the following classroom furniture: [].
20. A mercury thermometer was being used to take a child's temperature.
21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
22. 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: 11/01/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program



is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

Finding: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number 12 below:

1. Manufacturer's guidelines for the [] were not followed in that [].
2. The straps were missing on the [].
3. The straps were attached, but were not used on the [].
4. The straps were attached and were used, but were not used in a safe manner.
5. The equipment had sharp points or corners.
6. The equipment had splinters.
7. The equipment had protruding nails.
8. The equipment had loose or rusty parts.
9. The equipment had paint which contains lead or other poisonous materials.
10. The equipment had hazardous features.
11. A fan was unstable and could easily tip over.
12. A fan had openings a finger could enter (in the Toddler room).
13. The pipes from the heat pump felt hot to the touch
14. A space heater felt hot to the touch
15. The position of a space heater was a tripping hazard
16. The air conditioning unit was not enclosed and was accessible to children on the playground.
17. A ball pit, trampoline, inflatable bounce house, inflatable slide, or inflatable equipment used for climbing and bouncing was used.
18. Other [].

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

Corrective Action Plan Due: 11/01/2023

Domain: 03 Postings & Equipment

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

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item numbers 1 & 2 below:

1. Fire alert plan, including a diagram indicating evacuation routes (written fire plan missing in the Toddler room).
2. Weather alert plan was missing (written weather plan missing in the Toddler room).
3. Weather alert plan was missing a diagram indicating evacuation routes.



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

Corrective Action Plan Due: 11/01/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment

Code: 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.

Finding: During the inspection, it was determined that outdoor play equipment was unsafe or not used as intended as noted in number 6 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 (a bin was broken and a plastic toy was broken).
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 [].

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

Corrective Action Plan Due: 11/01/2023



Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to have an outdoor play space free from trash and foreign objects.

Finding: During the inspection, it was determined that the outdoor play space was not free of trash or foreign objects as noted in number 8 below:

1. The outdoor area was littered with trash.
2. The trash can was missing a lid.
3. The trash can was not emptied from the day(s) before.
4. The trash can was overflowing with trash.
5. The trash can was infested with insects.
6. The trash can was visibly dirty.
7. There was broken glass.
8. There were tall weeds.
9. There was poison ivy.
10. There were tree branches.
11. There was mold visible.
12. There were thistles with pricklers.
13. There were bird droppings.
14. The sandbox was contaminated.
15. Other [].

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

Corrective Action Plan Due: 11/01/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to conduct and document quarterly inspections of their outdoor play space.

Finding: During the inspection, it was determined that quarterly inspections of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form (missed 3rd quarter). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 11/01/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Indoor Space Requirements

Code: The program is required to have only the number of children in attendance that is allowed by the indoor floor space.

Finding: During the inspection, it was determined that 5 children were in attendance at one time in the Infant room and the classroom's usable floor space allowed for 4 children. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023

Domain: 05 Health & Safety

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

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

Finding: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in numbers 3 & 6 below.

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

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

Corrective Action Plan Due: 11/01/2023



Domain: 05 Health & Safety

Rule: 5101:2-12-22 Safe Food Handling/Storage

Code: The program is required to store and serve food in a safe manner.

Finding: During the inspection, it was determined that food was not stored in a safe manner as noted in number 5 below:

1. The refrigerator did not maintain a temperature of 40 degrees Fahrenheit or below.
2. Milk was not refrigerated for approximately () minutes after being served.
3. Food was observed thawing on the counter.
4. Spoiled food was served to children.
5. Other: food for lunch was stored at room temperature on the counter (mixed vegetables and boneless rib patties).

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

Corrective Action Plan Due: 11/01/2023

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item numbers 1-3 below:

1. Monthly fire drills (missed September).
2. Monthly weather emergency drills (required March through September, missed September).
3. Emergency/lockdown drills in each quarter of the calendar year (missed 2nd & 3rd quarter).

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

Corrective Action Plan Due: 11/01/2023



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 numbers 3, 5, 6, 9 & 12 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: 11/01/2023

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation - Vehicle Requirements

Code: The program is required to complete and document weekly inspections of vehicles used to transport children.



Finding: During the inspection, it was determined that the program had not performed and/or documented weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

1. A visual inspection of the tires for wear and tire pressure
2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges
3. An inspection for properly functioning child and driver restraints
4. An inspection for properly functioning doors and windows
5. An inspection for, and cleaning of, debris from inside the vehicle

Submit the program's corrective action plan, which includes a copy of the documented weekly inspection of vehicles, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to have all drivers be an employee of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program.

Finding: During the inspection, it was determined that the requirements for drivers was not met as listed in number 1 below:

1. The driver noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.
2. At least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.
3. The driver used to transport children was not an employee of the program, a public transportation driver, or employed by a company contracted to provide transportation service.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023

Domain: 06 Program Information



Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to have children and staff practice and document safely exiting vehicles during an emergency.

Finding: During the inspection, it was determined that the program had not conducted and/or documented monthly emergency exiting drills on vehicles with children, including the date of the drill and all staff who transport children. 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: 11/01/2023

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to take all required safety and health items on trips.

Finding: During the inspection, it was determined that all required items were not taken on a field trip and/or routine trip as determined in that the item numbers 1, 2 & 4 below was missing:

1. Completed copies of the JFS 01234 "Child Enrollment and Health Information For Child Care" (except routine walks);
2. First aid supplies;
3. A working cellular phone or other means of immediate communication (not to be used while a vehicle is in motion);
4. Written record of children on the trip, including which vehicle each child is being transported in and the cellular phone number of the adult in that vehicle who could be contacted in an emergency.

Provide staff training. Submit the program's corrective action plan, which includes a written plan that ensures these safety guidelines will be met when children are transported, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/01/2023

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 number 1 below:

1. Written instructions were not on file.
2. Type of food and/or formula/breast milk was missing.
3. Amount of food and/or formula/breast milk was missing.
4. Feeding times or frequency of feedings was missing.
5. The written instructions on file had not been updated.

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

Corrective Action Plan Due: 11/01/2023

Domain: 07 Diapering & Infant Care

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

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

Finding: During the inspection, it was determined that the written record used to document infant routines and activities did not meet the requirements as noted in number 1 below:

1. A daily written record was not provided to the parent or person picking up the infant on a daily basis.
2. Food intake was missing.
3. Sleeping patterns was missing.
4. Times and results of diaper changes was missing.
5. Information about daily activities was missing.

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

Corrective Action Plan Due: 11/01/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to provide cribs with mattresses in good condition and sheets that are not too large or too small for the crib.



Finding: During the inspection, it was determined that sheets, mattresses and/or mattress covers did not meet the rule requirement as noted in numbers 2 & 9 below:

1. At least one crib did not have a sheet.
2. At least one sheet was too large.
3. At least one sheet was too small.
4. At least one sheet was torn.
5. The mattress was not at least one and one-half inches thick.
6. The mattress was not firm.
7. There was space between the mattress and the sides and end panels of the crib which exceeded one and one-half inches.
8. The mattress cover was not waterproof.
9. The mattress cover was torn.
10. Other: [].

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

Corrective Action Plan Due: 11/01/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to provide a safe and sufficient barrier to separate the play and sleeping space.

Finding: During the inspection, it was determined that the barrier between the play and sleeping space did not meet the requirements as noted in numbers 1 & 6 below:

1. No barrier had been provided (in the Infant room)
2. The barrier did not prevent the infants from entering the sleeping area.
3. The barrier was not safe.
4. The barrier was not sturdy.
5. The barrier impaired staff's ability to see and hear all sleeping infants in their cribs.
6. The barrier was inadequate (in the Toddler room).
7. Other [].

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

Corrective Action Plan Due: 11/01/2023



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. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 11/01/2023

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 2, 4, 5 & 6 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: []



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

Corrective Action Plan Due: 11/01/2023

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.

Finding: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

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

Corrective Action Plan Due: 11/01/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

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

Finding: 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 numbers 1 & 5b 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: 11/01/2023

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 & 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: 11/01/2023



Domain: 08 Staff Files

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

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

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in numbers 2, 5, 10 & 13 below:

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

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

Corrective Action Plan Due: 11/01/2023

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 numbers 1, 4, 5, 6, 10, 12, 13 & 15 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: 11/01/2023

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 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
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: 11/01/2023

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
5101:2-12-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed, but was not posted. Following is the audit number and date of expiration: #9971483, exp 3/1/24. Please be reminded to print a copy and post it.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional Development Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 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: 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: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
5101:2-12-17 Materials and Equipment	Compliant	
5101:2-12-17 Daily Outdoor Play	Compliant	
5101:2-12-18 License Capacity	Compliant	
5101:2-12-19 Child Guidance	Compliant	
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were placed appropriately and safely during nap time.
5101:2-12-22 Fluid Milk Requirements	Compliant	
5101:2-12-23 Diapering and Toilet Training	Compliant	
5101:2-12-25 Medication Administration	Compliant	