

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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      |  |
| Lucky Academy LTD               | 2230028793              |                 | Child Care Center |  |
|                                 |                         |                 |                   |  |
| Address                         |                         |                 | County            |  |
| 454 Industrial Mile Rd Columbus |                         |                 | FRANKLIN          |  |
| OH 43228                        |                         |                 |                   |  |
|                                 |                         |                 |                   |  |
|                                 | _                       |                 |                   |  |
| Building Approval Date          | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |  |
| 08/15/2023                      | E                       |                 |                   |  |
| Fire Inspection Approval Date   | Food Service Risk Level |                 |                   |  |
| 08/15/2023                      | Level II                |                 |                   |  |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection Sc                  | cope             | Inspection Notice |              |
| Pre-license            | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time 1                   | 1:30 AM          | End Time 2:00 PM  |              |
| 10/10/2023             |                                |                  |                   |              |
| Reviewer:              |                                |                  |                   |              |
| Barbara Smith          | Barbara Smith                  |                  |                   |              |
| C f r! d!              |                                |                  |                   |              |
| Summary of Findings    |                                |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                     | 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)                                 |                  | 0          | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0     |
| Total Under 2 ½ Years                                     |                  | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 |                  | 0          | 0         | 0     |

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

## **Summary of Non-Compliances**

If 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  |
|   |
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|   |
|   |
|   |
| Moderate Risk Non-Compliances   |
| No Moderate Risk Non-Compliances were observed during this inspection |
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|   |
|   |
| Low Risk Non-Compliances  |
| 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>: 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 22 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 (Two outlets in the school age room need a covering over the outlets; baseboard needs attached to wall in infant room by bathroom door.

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: 11/09/2023

#### Domain: 03 Postings & Equipment

<u>Rule</u>: 5101:2-12-16 Medical, Dental, and General Emergency Plan <u>Code</u>: The program is required to post the fire and weather plans.

<u>Finding</u>: During the inspection, it was determined that the following information was not posted for item number 1 below:

- 1. Fire alert plan, including a diagram indicating evacuation routes.
- 2. Weather alert plan was missing details for [ ].
- 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: 11/09/2023

## 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.

<u>Finding</u>: During the inspection, it was determined that the outdoor play space was not free of trash or foreign objects as noted in number(s) 1 and 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 prickers.
- 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: 11/09/2023

#### **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.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 4 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: 11/09/2023

### Rules In-Compliance/Not Verified

| Rule                              | Status    | Documenting Statement(s), If applicable  |
|-----------------------------------|-----------|--|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding posting the program's license were discussed. |
|                                   |           | <u> </u>   |

|  | Rule | Status | Documenting Statement(s), If applicable |
|--|------|--------|---|
|--|------|--------|---|

| Rule: 5101:2-12-02 Current         | Compliant | Documenting Statement: During the   |
|------------------------------------|-----------|---|
| Information                        | **        | inspection, the requirements of the rule                                      |
|                                    |           | regarding maintaining current   |
|                                    |           | information in the Ohio Child Licensing                                       |
|                                    |           | and Quality System were discussed.  |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-03 Inspection      | Compliant | Documenting Statement: During the   |
| Requirements                       |           | inspection, the requirements of the rule                                      |
|                                    |           | regarding compliance inspections and complaint investigations were discussed. |
|                                    |           | 300   |
| Rule                               | Status    | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-04 Building        | Compliant | Documenting Statement: A copy of the  |
| Department Inspection              |           | certificate of occupancy was available onsite for review.                     |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: Please Note:   |
|                                    |           | Documentation of a fire inspection without any uncorrected violations must    |
|                                    |           | be secured for the program. Secure a  |
|                                    |           | new fire inspection by 08/15/2024.  |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-04 Food Service    | Compliant | Documenting Statement: The food service                                       |
| Requirements                       |           | license was observed posted. Following is                                     |
|                                    |           | the audit number and date of expiration:                                      |
|                                    |           | Audit # BFRY-CVEL8B expires 03/01/2024.                                       |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-07 Administrator   | Compliant | Documenting Statement: During the   |
| Qualifications                     |           | inspection, the requirements of the rule                                      |
|                                    |           | regarding administrator qualifications were discussed.                        |
|                                    |           | were discussed.   |
| Rule                               | Status    | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: During the   |
| Policies and Procedures            |           | inspection, the requirements of the rule                                      |
|                                    |           | regarding the program's written policies                                      |
|                                    |           | and procedures were discussed.  |
|                                    |           |   |

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|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Medical Statement   | Compliant | Documenting Statement: During the  |
|  |           | inspection, the requirements of the rule   |
|  |           | regarding staff medical statements were  |
|  |           | discussed.   |
|  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Orientation   | Compliant | Documenting Statement: During the  |
| Training & Whistle Blower Protection   |           | inspection, the requirements of the rule   |
| Training & Winstle Blower Frotestion   |           | regarding orientation training and whistle   |
|  |           | blower protection were discussed.  |
|  |           | blower protection were discussed.  |
|  | 1         |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check  | Compliant | Documenting Statement: During the  |
| Requirements   | - zmposm. | inspection, the requirements of the rule   |
| Requirements   |           | regarding background checks were   |
|  |           | discussed.   |
|  |           | uiscusseu.   |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-10 Health Training   | Compliant | Documenting Statement: During the  |
| Requirements   | ,         | inspection, the requirements of the rule   |
|  |           | regarding health training were discussed.  |
|  |           | i obai amb nearm d'annig were alseasseal   |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-10 Professional  | Compliant | Documenting Statement: During the  |
| Development Requirements   | <i>*</i>  | inspection, the requirements of the rule   |
| The state of the s |           | regarding professional development   |
|  |           | training for administrators and child care   |
|  |           | staff members were discussed.  |
|  |           | Control Principle of Special State Control Con |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Indoor Space  | Compliant | Documenting Statement: During the  |
| Requirements   |           | inspection, the requirements of the rule   |
|  |           | regarding indoor space were discussed.   |
|  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Separation of   | Compliant | Documenting Statement: During the  |
| Children Under 2 1/2 Years   |           | inspection, the requirements of the rule   |
|  |           | regarding separation of children under   |
|  |           | two and one half years of age were   |
|  |           | discussed.   |
|  |           |  |
| ,  | -         |  |

| Rule   | Status                                  | Documenting Statement(s), If applicable  |
|--|---|--|
| Rule: 5101:2-12-11 Outdoor Play  | Compliant                               | Documenting Statement: During the        |
| Equipment  |   | inspection, the requirements of the rule |
| - 10 To 10 T |   | regarding outdoor play equipment were    |
|  |   | discussed.                               |
|  |   |  |
|  | _                                       |  |
| Rule   | Status                                  | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Play Fall   | Compliant                               | Documenting Statement: During the        |
| Zones  |   | inspection, the requirements of the rule |
|  |   | regarding outdoor play fall zones were   |
|  |   | discussed.                               |
|  |   |  |
| Rule   | Status                                  | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-12 Safe Equipment  | Compliant                               | Documenting Statement: During the        |
|  |   | inspection, the requirements of the rule |
|  |   | regarding safe equipment were discussed. |
|  |   |  |
| Rule   | Status                                  | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Sanitary  | Compliant                               | Documenting Statement: During the        |
| Equipment and Environment  |   | inspection, the requirements of the rule |
|  |   | regarding sanitary equipment and         |
|  |   | environment were discussed.              |
|  |   |  |
| Rule   | Status                                  | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Handwashing   | Compliant                               | Documenting Statement: During the        |
| Requirements   | **                                      | inspection, the requirements of the rule |
|  |   | regarding handwashing were discussed.    |
|  |   |  |
| Rule   | Status                                  | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Smoke Free  | Compliant                               | Documenting Statement: A notice was      |
| Environment  | Solito - (Chilosope Booksolous) video " | observed posted stating that smoking is  |
|  |   | prohibited at the program.               |
|  |   |  |
| Rule   | Status                                  | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-15 Child Medical and   | Compliant                               | Documenting Statement: During the        |
| Enrollment Records   |   | inspection, the requirements of the rule |
|  |   | regarding children's medical statements  |
|  |   | and enrollments forms were discussed.    |
|  |   |  |
| Rule   | Status                                  | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-15 Medical/Physical  | Compliant                               | Documenting Statement: During the        |
| Care Plans   |   | inspection, the requirements of the rule |
|  | 1                                       | mercan, are requirements of the fale     |



|   |  | regarding caring for children with a specific health condition were discussed.  |
|---|--|---|
| Rule  | Status   | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills   | Compliant  | Documenting Statement: During the   |
| 1990 1790   | *  | inspection, the requirements of the rule  |
|   |  | regarding emergency drills were   |
|   |  | discussed.  |
|   |  |   |
| Rule  | Status   | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 First Aid/Standard   | Compliant  | Documenting Statement: During the   |
| Precautions   |  | inspection, the program had complete  |
|   |  | first aid kits available as required.   |
|   |  |   |
| Rule  | Status   | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Management of  | Compliant  | Documenting Statement: During the   |
| Communicable Disease  |  | inspection, the requirements of the rule  |
|   |  | regarding management of communicable  |
|   |  | diseases were discussed.  |
|   |  |   |
| Rule  | Status   | Documenting Statement(s), If applicable   |
|   |  | Documenting Statement(3), II applicable   |
| Rule: 5101:2-12-16 Incident/Injury  | Compliant  |   |
| Rule: 5101:2-12-16 Incident/Injury Reporting  | Compliant  | Documenting Statement: During the   |
| 1   | Compliant  |   |
| 1   | Compliant  | Documenting Statement: During the inspection, the requirements of the rule  |
| 1   | Compliant  | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries   |
| 1   |  | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.   |
| Reporting   | Status   | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable  |
| Reporting  Rule Rule: 5101:2-12-16 Written Disaster                                   |  | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the  |
| Reporting   | Status   | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule   |
| Reporting  Rule Rule: 5101:2-12-16 Written Disaster                                   | Status   | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the  |
| Reporting  Rule Rule: 5101:2-12-16 Written Disaster                                   | Status   | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were  |
| Reporting  Rule Rule: 5101:2-12-16 Written Disaster                                   | Status<br>Compliant                                | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.   |
| Rule Rule: 5101:2-12-16 Written Disaster Plan Rule                                    | Status<br>Compliant<br>Status                      | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable  |
| Rule Rule: 5101:2-12-16 Written Disaster Plan   | Status<br>Compliant                                | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the  |
| Rule Rule: 5101:2-12-16 Written Disaster Plan Rule                                    | Status<br>Compliant<br>Status                      | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule   |
| Rule Rule: 5101:2-12-16 Written Disaster Plan Rule                                    | Status<br>Compliant<br>Status                      | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the  |
| Rule Rule: 5101:2-12-16 Written Disaster Plan Rule                                    | Status<br>Compliant<br>Status                      | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the program's daily schedule  |
| Rule Rule: 5101:2-12-16 Written Disaster Plan  Rule Rule: 5101:2-12-17 Daily Schedule | Status Compliant Status Compliant                  | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the program's daily schedule were discussed.  |
| Rule Rule: 5101:2-12-16 Written Disaster Plan  Rule Rule: 5101:2-12-17 Daily Schedule | Status Compliant Status Compliant Status Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the program's daily schedule were discussed.  Documenting Statement(s), If applicable |
| Rule Rule: 5101:2-12-16 Written Disaster Plan  Rule Rule: S101:2-12-17 Daily Schedule | Status Compliant Status Compliant                  | Documenting Statement: During the inspection, the requirements of the rule regarding reporting incidents and injuries were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.  Documenting Statement(s), If applicable Documenting Statement: During the inspection, the requirements of the rule regarding the program's daily schedule were discussed.  |



|                                       |           | regarding materials and equipment were discussed.                       |
|---------------------------------------|-----------|---|
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: During the                                       |
|                                       |           | inspection, the requirements of the rule                                |
|                                       |           | regarding daily outdoor play were discussed.                            |
|                                       |           | discussed.  |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-18 License Capacity   | Compliant | Documenting Statement: The program                                      |
|                                       |           | was seeking initial licensure. The                                      |
|                                       |           | program requested to serve a total capacity of 79 children; of this, 26 |
|                                       |           | children may be under two and one-half                                  |
|                                       |           | years of age.   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-18 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                                  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-18 Group Size         | Compliant | Documenting Statement: During the                                       |
|                                       |           | inspection, the requirements of the rule                                |
|                                       |           | regarding group size were discussed.                                    |
| <u>I</u>                              |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-18 Attendance         | Compliant | Documenting Statement: During the                                       |
| Records                               |           | inspection, the requirements of the rule                                |
|                                       |           | regarding attendance records were                                       |
|                                       |           | discussed.  |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-19 Supervision        | Compliant | Documenting Statement: During the                                       |
|                                       |           | inspection, the requirements of the rule                                |
|                                       |           | regarding supervision of children were                                  |
|                                       |           | discussed.  |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                 |

| Rule: 5101:2-12-19 Child Guidance                 | Compliant           | Documenting Statement: During the inspection, the requirements of the rule regarding child guidance were discussed.       |
|---|---------------------|---|
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-20 Cots and Napping               | Compliant           | Documenting Statement: During the inspection, the requirements of the rule regarding sleeping and napping were discussed. |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-20 Cribs                          | Compliant           | Documenting Statement: During the inspection, the requirements of the rule regarding cribs were discussed.                |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-21 Evening and                    | Compliant           | Documenting Statement: During the   |
| Overnight Care                                    | Compilant           | inspection, the requirements of the rule regarding evening and overnight care were discussed.                             |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: During the inspection, the requirements of the rule regarding meals and snacks were discussed.     |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-22 Fluid Milk<br>Requirements     | Compliant           | Documenting Statement: During the inspection, the requirements of the rule regarding fluid milk were discussed.           |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-22 Safe Food                      | Compliant           | Documenting Statement: During the   |
| Handling/Storage                                  | Compilant           | inspection, the requirements of the rule regarding safe food handling were discussed.                                     |
| Rule  | Chatus              | Decumenting Statemental of a wall-sala  |
| Rule: 5101:2-12-23 Infant Daily Care              | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the requirements of the rule       |



|                                      |           | regarding infant daily care were discussed. |
|--------------------------------------|-----------|---|
|                                      | C         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: During the           |
| Food Preparation                     |           | inspection, the requirements of the rule    |
|                                      |           | regarding infant bottle and food            |
|                                      |           | preparation were discussed.                 |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-23 Diapering and     | Compliant | Documenting Statement: During the           |
| Toilet Training                      |           | inspection, the requirements of the rule    |
|                                      |           | regarding diapering and toilet training     |
|                                      |           | were discussed.                             |
|                                      |           | I   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-25 Medication        | Compliant | Documenting Statement: During the           |
| Administration                       |           | inspection, the requirements of the rule    |
|                                      |           | regarding administering medication, food    |
|                                      |           | supplements and medical foods were          |
|                                      |           | discussed.                                  |
|                                      | 1         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-08 Child Care Staff  | Compliant | Documenting Statement: During the           |
| Member Educational Requirements      |           | inspection, the requirements of the rule    |
|                                      |           | regarding verification of education for     |
|                                      |           | child care staff members were discussed.    |
|                                      |           |   |