

# **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      |  |  |
| Little Tikes School of Academic Excellence | 2240030814              |                 | Child Care Center |  |  |
| LLC  |                         |                 |                   |  |  |
| Address                                    | 7,00                    |                 | County            |  |  |
| 2631 Harvard Ave NW. Canton STARK          |                         |                 |                   |  |  |
| ОН   |                         |                 |                   |  |  |
| 44709                                      |                         |                 |                   |  |  |
|  |                         |                 |                   |  |  |
| Building Approval Date                     | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |  |  |
| 12/18/2024                                 | E                       | 100             |                   |  |  |
| Fire Inspection Approval Date              | Food Service Risk Level |                 |                   |  |  |
| 10/31/2024                                 | Exempt                  |                 |                   |  |  |

|                     | Inspection Information         |                  |                   |              |  |  |
|---------------------|--------------------------------|------------------|-------------------|--------------|--|--|
| Inspection Type     | Inspection So                  | cope             | Inspection Notice |              |  |  |
| Provisional         | Full                           |                  | Unannounced       |              |  |  |
| Inspection Date     | Begin Time                     |                  | End Time          |              |  |  |
| 10/15/2025          | 9:00 AM                        |                  | 1:30 PM           |              |  |  |
| Reviewer:           |                                |                  |                   |              |  |  |
| AQILA BROWN         |                                |                  |                   |              |  |  |
| Summary of Findings |                                |                  |                   |              |  |  |
| No. Rules Verified  | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |  |
| 58                  | 7                              | 0                | 0                 | 6            |  |  |

| 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)                                 |                  | 6          | 0         | 6     |  |
| Young Toddler   |                  | 5          | 0         | 5     |  |
| Total Under 2 ½ Years                                     | 44               | 11         | 0         | 11    |  |
| Older Toddler   |                  | 16         | 0         | 16    |  |
| Preschool   |                  | 0          | 0         | 0     |  |
| School Age  |                  | 6          | 0         | 6     |  |
| Total Capacity/Enrollment                                 | 93               | 22         | 0         | 33    |  |

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



| Toddlers   | 18 months to < 30 months | 1 to 4 | Activity          |
|------------|--------------------------|--------|-------------------|
| Toddlers   | 18 months to < 30 months | 1 to 4 | Lunch             |
|            |                          |        |                   |
|            |                          |        | Packed lunches    |
| Toddlers   | 18 months to < 30 months | 1 to 3 | Nap               |
| Infants    | 0 to < 12 months         | 2 to 6 | Infant programing |
| Infants    | 0 to < 12 months         | 2 to 6 | Lunch /Infant     |
|            |                          |        | Feeding           |
| Infants    | 0 to < 12 months         | 1 to 5 | Diaper Change     |
| Preschool  | 3 years to < 4 years     | 1 to 5 | Activity          |
| Preschool  | 3 years to < 4 years     | 1 to 5 | Lunch             |
|            |                          |        |                   |
|            |                          |        | Packed lunches    |
| School Age | School-Age to < 11 years | 1 to 4 | Arrival from bus  |
| School Age | 4 years to < 5 years     | 1 to 8 | PM Snack          |
|            |                          |        | (Packed)          |
|            |                          |        | Activity          |
|            |                          |        | Combined with     |
|            |                          |        | Preschool         |

# **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 5180:2-12-03 and 5180:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

| Serious Risk Non-Compliances   |  |  |
|--|--|--|
| No Serious Risk Non-Compliances were observed during this inspection |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

| Moderate Risk Non-Compliances   |   |  |  |
|---|---|--|--|
| No Moderate Risk Non-Compliances were observed during this inspection |   |  |  |
|   | 7 |  |  |



# **Low Risk Non-Compliances**

# **Domain: 00 License & Approvals**

Rule: 5180:2-12-02 Current Information

<u>Code</u>: The rule requires the program to request an administrator amendment, and submit qualifications for a new administrator, within thirty days of the change.

<u>Finding</u>: During the inspection, it was determined that a change of administrator had been made and the owner or administrator had failed to provide notification of this change to the Department and/or submit qualifications for the new administrator within 30 days. A license is only valid for the licensee, administrator, address and license capacity designated on the license. Technical assistance was provided, and as discussed, submit the request to amend the license to remove Lydia and any required documentation, if applicable, through the licensing system, OCLQS.

Corrective Action Plan Due: 11/14/2025

## Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-12 Safe Equipment

<u>Code</u>: 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.

<u>Finding</u>: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number 5 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. Radiator in Toddler room.
- 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.
- 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: 11/14/2025

#### Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-12-11 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 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. Toddler playground
- 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: 11/14/2025

#### Domain: 08 Staff Files

Rule: 5180:2-12-07 Administrator Qualifications

<u>Code</u>: The program administrator is required to complete the rules course reivew within the defined time period.

<u>Finding</u>: During the inspection, it was determined that the administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in this rule. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time. Please submit verification that Administrator Rules Trainings 1 and 2 were completed.

Corrective Action Plan Due: 11/14/2025

#### **Domain: 08 Staff Files**

Rule: 5180:2-12-07 Administrator Responsibilities/Requirements

<u>Code</u>: 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 7 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: 11/14/2025

#### **Domain: 08 Staff Files**

Rule: 5180:2-12-10 Health Training Requirements

<u>Code</u>: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number 4 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 of the child care staff member who must complete the required health and safety training. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/14/2025

## Rules In-Compliance/Not Verified





|  |   | educational requirements on file at the program.                         |
|--|---|--|
| Rule   | Status  | Documenting Statement(s), If applicable                                  |
| Rule: 5180:2-12-08 Orientation   | Compliant   | Documenting Statement: On the day of                                     |
| Training & Whistle Blower Protection   | Compilant   | the inspection, all child care staff                                     |
| Taniming of Transition Procession  |   | members had met orientation training                                     |
|  |   | requirements.  |
|  |   | 1044110111011  |
| Rule   | Chatus  | Decumenting Statement(s) If applicable                                   |
|  | Status  | Documenting Statement(s), If applicable                                  |
| Rule: 5180:2-12-09 Background Check  | Compliant   | Documenting Statement: During the inspection, the required documentation |
| Requirements   |   | regarding background checks was on file                                  |
|  |   | for all employees listed.  |
|  |   | for all employees listed.  |
|  |   |  |
| Rule   | Status  | Documenting Statement(s), If applicable                                  |
| 5180:2-12-10 Professional  | Compliant   |  |
| Development Requirements   |   |  |
| Rule   | Status  | Documenting Statement(s), If applicable                                  |
| 5180:2-12-11 Indoor Space  | Compliant   |  |
| Requirements   | ·   |  |
|  |   |  |
| Rule   | Status  | Documenting Statement(s), If applicable                                  |
| 5180:2-12-11 Separation of Children<br>Under 2 1/2 Years   | Compliant   |  |
| Officer 2 1/2 rears  |   |  |
| Rule   | Status  | Documenting Statement(s), If applicable                                  |
| Rule: 5180:2-12-11 Outdoor Play  | Compliant   | Documenting Statement: Outdoor   |
| Equipment  |   | equipment was viewed to be safe and                                      |
|  |   | free of rust, sharp points, and other                                    |
|  |   | hazards.   |
| L  |   |  |
| Rule   | Status  | Documenting Statement(s), If applicable                                  |
| Rule: 5180:2-12-11 Outdoor Play Fall   | Compliant   | Documenting Statement: The protective                                    |
| Zones  |   | material used under outdoor equipment                                    |
|  |   | was pea gravel.  |
|  |   |  |
| Rule   | Status  | Documenting Statement(s), If applicable                                  |
| Rule: 5180:2-12-12 Safe Environment  | Compliant   | Documenting Statement: A safe  |
| The second secon | converted and a state of the s | environment was observed during the                                      |
|  |   | inspection. Children were protected from                                 |
|  |   | items and conditions which threaten their                                |
|  |   | health, safety and well-being.   |



| Rule                                  | Status    | Documenting Statement(s), If applicable                                      |
|---------------------------------------|-----------|--|
| Rule: 5180:2-12-13 Sanitary           | Compliant | Documenting Statement: On the day of   |
| Equipment and Environment             |           | the inspection, the program provided a                                       |
|                                       |           | clean environment in accordance with   |
|                                       |           | Appendix A of this rule, which included                                      |
|                                       |           | the furniture, materials and equipment.                                      |
| •                                     |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5180:2-12-13 Handwashing        | Compliant | Documenting Statement: Staff and   |
| Requirements                          |           | children were observed washing hands a                                       |
|                                       |           | required by the rule.  |
| Rule                                  | Status    | Desumenting Statements   If applicable                                       |
| Rule: 5180:2-12-13 Smoke Free         | Compliant | Documenting Statement(s), If applicable  Documenting Statement: A notice was |
|                                       | Compilant | observed posted stating that smoking is                                      |
| Environment                           |           | prohibited at the program.   |
|                                       |           | pronibited at the program.   |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                      |
| 5180:2-12-14 Transportation - Driver  | Compliant | boomening statement(s), it approach  |
| Requirements                          | Compilant |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                      |
| 5180:2-12-14 Transportation and Field | Compliant |  |
| Trip Procedures                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5180:2-12-14 Transportation -   | Compliant | Documenting Statement: An annual   |
| Vehicle Requirements                  |           | safety check of the vehicle, using the JFS                                   |
| 1                                     |           | 01230 "Vehicle Inspection Report For   |
|                                       |           | Child Care Centers" form, was verified                                       |
|                                       |           | and dated 2/18/2025.   |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5180:2-12-15 Medical/Physical   | Compliant | Documenting Statement: The program   |
| Care Plans                            |           | had current information on the medical                                       |
|                                       |           | status and the required treatment plan                                       |
|                                       |           | for the children with health conditions.                                     |
| nel e                                 | Charles   |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                                      |
| Rule: 5180:2-12-16 Medical, Dental,   | Compliant | Documenting Statement: On the day of   |
| and General Emergency Plan            |           | the inspection, the complete prescribed                                      |
|                                       |           | JFS 01242 "Medical, Dental, and General                                      |



|  |  | Emergency Plan For Child Care" were       |
|--|--|---|
|  |  | posted in the program as required.        |
|  |  | posted in the program as required.        |
| L  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-16 Emergency Drills  | Compliant  | Documenting Statement: Documentation      |
| Maler & Lead II To Emergency Dimis   | Compilarie   | for completed fire, weather, and          |
|  |  | emergency/lockdown drills was verified    |
|  |  | during this inspection.                   |
|  |  | during this inspection.                   |
|  | Į.   |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-16 First Aid/Standard  | Compliant  | Documenting Statement: During the         |
| Precautions  |  | inspection, the program had complete      |
| A reason and the control and the reason of the control and the |  | first aid kits available as required.     |
|  |  |   |
|  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-16 Management of   | Compliant  | Documenting Statement: The JFS 08087      |
| Communicable Disease   | 00 000 000 000 000 000 000 000 000 000   | "Communicable Disease Chart" was          |
|  |  | posted and was readily available to staff |
|  |  | and parents.                              |
|  |  | and parents.                              |
|  | <u>l</u>   |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-16 Incident/Injury   | Compliant  | Documenting Statement: The JFS 01299      |
| Reporting  | The second secon | "Incident/Injury Report For Child Care"   |
|  |  | forms reviewed during this inspection     |
|  |  | were complete as required.                |
|  |  | Were complete as required.                |
|  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-18 Attendance  | Compliant  | Documenting Statement: During the         |
| Records  | '  | inspection, attendance records were       |
|  |  | reviewed. Child Care Staff Members were   |
|  |  | viewed recording the attendance for each  |
|  |  | child upon arrival and departure. All     |
|  |  | attendance records met the requirements   |
|  |  | of the rule and were kept with the group  |
|  |  | at all times.                             |
|  |  | at all tillies.                           |
|  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| 5180:2-12-18 Group Size  | Compliant  | Boodiffering statement(5), if applicable  |
| 3100.2 12 10 Gloup Size  | Compilant  |   |
|  | 1  | ·   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-17 Daily Schedule  | Compliant  | Documenting Statement: Daily schedules    |
|  |  | were observed posted.                     |
|  | 1  | Troit o Societa postear                   |



| Rule                             | Status    | Documenting Statement(s), If applicable    |
|----------------------------------|-----------|--|
| Rule: 5180:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient          |
| Equipment                        | '         | equipment was observed in all categories   |
|                                  |           | J - 1 - 1                                  |
| Rule: 5180:2-12-17 Materials and | Compliant | Documenting Statement: Quiet areas         |
| Equipment                        | ,         | were observed in the classrooms.           |
|                                  |           |  |
| D. I                             | Clark     |  |
| Rule                             | Status    | Documenting Statement(s), If applicable    |
| 5180:2-12-17 Daily Outdoor Play  | Compliant |  |
|                                  |           |  |
| Rule                             | Status    | Documenting Statement(s), If applicable    |
| 5180:2-12-18 License Capacity    | Compliant |  |
|                                  | 1         |  |
| Rule                             | Status    | Documenting Statement(s), If applicable    |
| Rule: 5180:2-12-18 Ratio         | Compliant | Documenting Statement: Staff/child         |
|                                  |           | ratios observed during the inspection      |
|                                  |           | were in compliance.                        |
|                                  |           | I  |
| Rule                             | Status    | Documenting Statement(s), If applicable    |
| Rule: 5180:2-12-19 Supervision   | Compliant | Documenting Statement: Child Care Staff    |
|                                  |           | Members were supervising the children      |
|                                  |           | and were able to intervene as needed.      |
| Rule: 5180:2-12-19 Supervision   | Compliant | Documenting Statement: During the          |
|                                  |           | inspection, child care staff were observed |
|                                  |           | assisting children throughout the day.     |
|                                  |           |  |
| 0.1                              | C         |  |
| Rule                             | Status    | Documenting Statement(s), If applicable    |
| 5180:2-12-20 Cots and Napping    | Compliant |  |
| n I                              |           |  |
| Rule 5100-2 12 20 Cribs          | Status    | Documenting Statement(s), If applicable    |
| Rule: 5180:2-12-20 Cribs         | Compliant | Documenting Statement: All cribs were      |
|                                  |           | placed 2 feet apart.                       |
| Rule: 5180:2-12-20 Cribs         | Compliant | Documenting Statement: Cribs were          |
|                                  |           | separated from the play space by a safe    |
|                                  |           | and sturdy and physical barrier.           |
| Rule: 5180:2-12-20 Cribs         | Compliant | Documenting Statement: All cribs were      |
| Rule: 5180:2-12-20 Crips         | Compliant | labeled with the assigned infant's name.   |
|                                  | 1         | i abeleu with the assigned infant's name.  |



| Rule                                 | Status                               | Documenting Statement(s), If applicable                                    |
|--------------------------------------|--------------------------------------|--|
| Rule: 5180:2-12-19 Child Guidance    | Compliant                            | Documenting Statement: The program   |
| Rule: 5160:2-12-19 Child Guidance    | Compliant                            | staff were observed using the positive                                     |
|                                      |                                      | child guidance techniques and practices in                                 |
|                                      |                                      | numbers 1, 3, 5 and 6 below.   |
|                                      |                                      | 1. Setting clear limits.   |
|                                      |                                      |  |
|                                      |                                      | Redirecting to an appropriate activity.     Showing positive alternatives. |
|                                      |                                      | 3. Showing positive alternatives.  |
|                                      |                                      | 4. Modeling the desired behavior.  |
|                                      |                                      | 5. Reinforcing appropriate behavior.                                       |
|                                      |                                      | 6. Encouraging children to control their                                   |
|                                      |                                      | own behavior, cooperate with others and                                    |
|                                      |                                      | solve problems by talking.   |
|                                      |                                      | 7. Separation from the situation (no                                       |
|                                      |                                      | more than one minute per each year of                                      |
|                                      |                                      | the child's age; not to be used with                                       |
|                                      |                                      | infants). Upon return to the activity, the                                 |
|                                      |                                      | reason for the separation and expected                                     |
|                                      |                                      | behavior were discussed with the child.                                    |
|                                      |                                      | 8. Holding a child for a short period of                                   |
|                                      |                                      | time, such as in a protective hug, so that                                 |
|                                      |                                      | the child may regain self-control.   |
|                                      |                                      |  |
| Rule                                 | Status                               | Documenting Statement(s), If applicable                                    |
| Rule: 5180:2-12-22 Meal and Snack    | Compliant                            | Documenting Statement: Meals were  |
| Requirements                         | one systematical process and secured | provided at intervals as required by this                                  |
| Section 1                            |                                      | rule. Packed lunches   |
|                                      |                                      |  |
|                                      |                                      |  |
| Rule                                 | Status                               | Documenting Statement(s), If applicable                                    |
| Rule: 5180:2-12-22 Safe Food         | Compliant                            | Documenting Statement: Sack lunches  |
| Handling/Storage                     |                                      | were stored in the refrigerator.   |
|                                      |                                      |  |
| Rule                                 | Status                               | Documenting Statement(s), If applicable                                    |
| Rule: 5180:2-12-23 Infant Daily Care | Compliant                            | Documenting Statement: An appropriate                                      |
|                                      |                                      | program of activities with infants was                                     |
|                                      |                                      | observed.  |
|                                      |                                      |  |
|                                      |                                      |  |
| Rule                                 | Status                               | Documenting Statement(s), If applicable                                    |
| Rule: 5180:2-12-23 Diapering and     | Compliant                            | Documenting Statement: Appropriate   |
| Toilet Training                      |                                      | diaper changing procedures were  |
|                                      |                                      | observed during the inspection in the                                      |
|                                      |                                      | infant room.   |
|                                      |                                      |  |
| Rule                                 | Status                               | Documenting Statement(s), If applicable                                    |
|                                      | 3.3.00                               |  |



|   |           | W  |
|---|-----------|--|
| Rule: 5180:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: All bottles were labeled as required.   |
| Rule: 5180:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: All bottles were warmed in accordance with the rule in a temperature controlled warmer.                           |
|   | -         |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5180:2-12-25 Medication                         | Compliant | Documenting Statement: There were no   |
| Administration  |           | children on medication at the time of the inspection; however, the method of storage and practices for the administration were reviewed. |
|   | 1-        |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5180:2-12-04 Building                           | Compliant | Documenting Statement: A copy of the   |
| Department Inspection                                 |           | certificate of occupancy was available on-<br>site for review.   |
|   |           |  |