Ohio Department of Children & Youth

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 FAIRLAWN KINDER CARE #1518	Program Number 000000104220		Program Type Child Care Center
Address 4050 EMBASSY PARKWAY FAIRLAWN OH 44333			County SUMMIT
Building Approval Date 01/21/1997	Use Group/Code E	Occupancy Limit 192	Maximum Under 2 ½
Fire Inspection Approval Date 11/13/2023	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 09/03/2025	Begin Time 8:30 AM	End Time 1:30 PM
Reviewer: TONYA WASHINGTON		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	20	0	3	18

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)		9	0	9
Young Toddler		9	0	9
Total Under 2 ½ Years	50	18	0	18
Older Toddler		13	0	13
Preschool		25	0	25
School Age		0	8	8
Total Capacity/Enrollment	142	38	8	64

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

INFANTS	0 to < 12 months	2 to 8	TUMMY TIME
INFANTS	0 to < 12 months	2 to 9	DIAPER CHANGE
INFANTS	0 to < 12 months	2 to 8	NAP
TODDLERS	18 months to < 30 months	2 to 14	BREAKFAST
TODDLERS	18 months to < 30 months	2 to 10	FREE PLAY
TODDLERS	18 months to < 30 months	2 to 12	NAP
DISCOVERY PS	30 months to < 36 months	1 to 8	NAP
DISCOVERY PS	18 months to < 30 months	1 to 8	LUNCH
PRESCHOOL	3 years to < 4 years	2 to 21	CIRCLE TIME
PRESCHOOL	3 years to < 4 years	2 to 17	ARRIVAL
PRESCHOOL	4 years to < 5 years	2 to 21	NAP

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

Domain: 00 License & Approvals

Rule: 5180:2-12-04 Fire Inspection
Code: The program is required to have all spaces used for child care inspected by the fire department or the state fire marshal's office prior to serving children. The program is required to obtain a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection. If violations are noted during the inspection, the program is required to have all violations corrected and have the program re-inspected to obtain a completed fire form.

Finding: During the inspection, it was determined the program did not meet the requirements for fire inspection as noted in number 1 below:

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1. The program did not have documentation on file for a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection. The last fire inspection was conducted on 11.13.2023.
2. The documentation for the most recent fire inspection contained violations that had not been corrected.
3. The [ ] space was being used and had not been approved by the fire department or the state fire marshal's office for child care.

Submit the program's corrective action plan, which includes an updated fire inspection without any uncorrected violations, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/03/2025

Domain: 08 Staff Files

Rule: 5180:2-12-09 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 listed on the Employee Record Chart as noted in number 3 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 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 is 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: 10/03/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans
Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child

Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Finding: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in numbers 1, 30, 32, 33, and 38 below:

1. No plan was on file.
(Page 1)
2. Child's name was missing.
3. Name of the condition was missing.
4. Indication if medication or medical food is required was missing.
5. Signs, symptoms or situations that require staff to take action were missing.
6. Activities, foods, environmental conditions to avoid were missing.
7. Training instructions for procedures for staff to follow were missing or incomplete.
(Page 2)
8. Child's name was missing or not attached.
9. Child's date of birth was missing or not attached.
10. Child's weight was missing or not attached.
11. Name of the medication/medical food was missing or not attached.
12. Dosage of medication/medical food to be administered was missing or not attached.
13. Time for medication/medical food to be administered was missing or not attached.
14. Expiration date for medication/medical food was missing or not attached.
15. Symptoms that require staff to administer medication/medical food were missing or not attached.
16. Specific instructions to administer the medication/medical food were missing or not attached.
17. Actions to be taken if the symptoms do not subside were missing or not attached.
18. Physician's signature was missing or not attached.
19. The date of the physician's signature was missing or not attached.
(Page 3)
20. Child's name was missing.
21. Instructions regarding emergency evacuation, if applicable, were missing.
22. Signature of parent granting permission to implement the plan and verifying training was missing.
23. Date of parent signature was missing.
24. Certified Professional Trainer information was missing.
25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
26. Date of trainer signature was missing.
27. Printed name(s)of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
29. Date of staff signature was missing.
30. Administrator/Provider signature was missing
31. Date of administrator/Provider was missing.
(Page 4)
32. Child's name was missing.
33. Name of medication or medical food was missing.
34. Date the medication/medical food was administered was missing.
35. Time medication/medical food was administered was missing.
36. Dosage of medication/medical food that was administered was missing.

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37. Signature of person administering medication/medical food was missing.
38. The plan was not followed or implemented.
39. The plan was not able to be implemented due to conflicting information.
40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/03/2025

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-12-03 Inspection Requirements
Code: The program is required to respond to noncompliances by the date noted in the inspection report.

Finding: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection reports dated 4.29.25 and 7.22.25 both reports contained SRNC. The rule requires the program to complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/03/2025

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Domain: 00 License & Approvals

Rule: 5180:2-12-03 Inspection Requirements
Code: The program is required to notify parents when a serious risk noncompliance is cited. The program must provide a copy of the written notice to ODJFS.

Finding: During the inspection, it was determined the program did not provide a written or electronic notice of a serious risk noncompliance (SRNC), as noted in numbers 1,3 below:

1. The written notice was not provided to all parents of enrolled children within fifteen business days of receipt of the noncompliance.
2. The written notice was not provided to all parents of enrolled children within five business days of receipt of the decision of the finding being upheld following the request for review.
3. A copy of the written notice wasn't provided to ODJFS.
4. The written notice did not include a statement informing parents of the ODJFS web site and/or the location of further information regarding the SRNC.

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

Corrective Action Plan Due: 10/03/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-12 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 or condition which may threaten their health, safety, or well-being as noted in number 11 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 (pre k and toddler 2 space).
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: 10/03/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-13 Handwashing Requirements
Code: The program is required to have all staff and children wash their hands as outlined in rule.

Finding: During the inspection, it was determined that handwashing requirements were not followed as listed in number 1 below, as required in rule.

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

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

Corrective Action Plan Due: 10/03/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-13 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 numbers 5,15,20,21,27 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. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 10/03/2025

Domain: 03 Postings & Equipment

Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan
Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

Finding: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number 1,5 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [ ].

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

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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.

Finding: During the inspection, it was determined that the outdoor play space was not free of trash or foreign objects as noted in number 3 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 days 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: 10/03/2025

Domain: 05 Health & Safety

Rule: 5180:2-12-16 Incident/Injury Reporting
Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Finding: In review of the records, it was determined the program did not meet the requirements for completing a JFS 01299 "Incident/Injury Report" as noted in number 1,8 below:

1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
2.The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
3. The JFS 01299 was not completed when a child received a bump or blow to the head.

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4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program.
5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
6. The program information (program name, number, address) was incomplete on the JFS 01299.
7. Child's name was incomplete on the JFS 01299.
8. Child's birthdate was incomplete on the JFS 01299.
9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
11. Date and/or time of the incident was incomplete on the JFS 01299.
12. Whether or not parents were contacted was incomplete on the JFS 01299.
13. Complete summary of the incident was incomplete on the JFS 01299.
14. Accurate summary of the incident was incomplete on the JFS 01299.
15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
16. The JFS 01299 was not kept on file at the program for at least one year.
17. Other [ ].

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 10/03/2025

Domain: 05 Health & Safety

Rule: 5180:2-12-22 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 number 4 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 and not updated.
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.

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.

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Domain: 06 Program Information

Rule: 5180:2-12-14 Transportation and Field Trip Procedures
Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Finding: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in number 5 below.

1. Written parental permission was not secured for field trips and/or routine trips off the premises.
2. The written permission was missing the child's name.
3. The written permission was missing the date(s) of the trip(s) (field trips only).
4. The written permission was missing the destination(s) of the trip(s).
5. The written permission was missing the departure and return times of the trip to Lake 8 Movies on 7.8.25 (field trips only).
6. The written permission was missing the signature of the parent.
7. The written permission was missing the date on which the permission was signed.
8. The written permission was missing a statement notifying parents how their child will be transported.
9. Permission forms for routine trips were not being updated annually.
10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
11. Other: [ ].

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 10/03/2025

Domain: 06 Program Information

Rule: 5180:2-12-14 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

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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: 10/03/2025

Domain: 07 Diapering & Infant Care

Rule: 5180:2-12-23 Infant Bottle and Food Preparation
Code: The program staff is required to label and store bottles with breast milk following the requirements in rule.

Finding: During the inspection, it was determined that breast milk provided by the parent was not stored appropriately as noted in number 1 below:

1. Not labeled with infant's name, date pumped, and date bottle was prepared;
2. Not immediately refrigerated or frozen;
3. Stored at room temperature longer than eight hours;
4. Stored at the program for more than five days after it was expressed;
5. Stored longer than two weeks in the freezer compartment of the refrigerator;
6. Stored longer than six months in the refrigerator/freezer;
7. Stored longer than twelve months in the deep freezer;
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: 10/03/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement
Code: The program staff's medical statements are required to be completed and on file at the program.

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, 4, and 5a below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;

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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: 10/03/2025

Domain: 08 Staff Files

Rule: 5180:2-12-07 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 3, 5, 6, and 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: [ ]

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

Corrective Action Plan Due: 10/03/2025

Domain: 08 Staff Files

Rule: 5180:2-12-10 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 2, 3, 4, 5, 6 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 names of the child care staff members who must complete the required health and safety trainings. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/03/2025

Domain: 09 Children's Files

Rule: 5180:2-12-25 Medication Administration
Code: The program is required to store medical foods and topical products out of the reach of children.

Finding: During the inspection, it was determined that a medical food or topical product, being ointments in the toddler room, was within the reach of children in that here was not a child proof lock on the storage space. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 10/03/2025

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Domain: 09 Children's Files

Rule: 5180:2-12-15 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 4, 7, 8, 12, 13, 14 below.

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked “yes”
10. Emergency transportation information
11. Parent/guardian’s signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other [ ]

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 10/03/2025

Domain: 10 Written Policies & Procedures

Rule: 5180:2-12-16 Written Disaster Plan
Code: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

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Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 2 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 10/03/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Building Department Inspection	Compliant	Documenting Statement: A copy of the certificate of occupancy dated 1.10.1997 was available on-site for review.
Rule: 5180:2-12-04 Building Department Inspection	Compliant	Documenting Statement: On the day of the inspection, the program was operating in compliance with the current building approval.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-02 Current Information	Compliant	Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS).

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Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license Level III was observed posted.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-07 Administrator Qualifications	Compliant	Documenting Statement: The administrator has completed the rules review course.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	Documenting Statement: On the day of the inspection, all child care staff members had met orientation training requirements.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-10 Professional Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Indoor Space Requirements	Compliant	Documenting Statement: The restrooms are used exclusively by the program.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: All equipment in the outdoor play space was observed to be anchored and stable.
Rule: 5180:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards.
Rule: 5180:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: All equipment was observed to be properly placed out of the path of the main traffic pattern.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: The protective material used under outdoor equipment was wood chips/mulch.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-14 Transportation - Driver Requirements	Compliant	Documenting Statement: The drivers had completed the required ODJFS driver training.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.

Rule	Status	Documenting Statement(s), If applicable

Rule: 5180:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had complete first aid kits available as required.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 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
Rule: 5180:2-12-17 Materials and Equipment	Compliant	Documenting Statement: During the inspection, children had access to additional equipment in the classrooms.
Rule: 5180:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Attendance Records	Compliant	Documenting Statement: Child Care Staff Members were observed recording the attendance for each child upon arrival and documenting each child's departure.
Rule: 5180:2-12-18 Attendance Records	Compliant	Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes observed on the day of the inspection were in compliance.

Rule	Status	Documenting Statement(s), If applicable

Rule: 5180:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play was observed for the toddler groups.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 License Capacity	Compliant	Documenting Statement: The program was operating within their license capacity limits.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Ratio	Compliant	Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required.
Rule: 5180:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-20 Cots and Napping	Compliant	Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children.
Rule: 5180:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were placed appropriately and safely during nap time.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-19 Supervision	Compliant	Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group.
Rule: 5180:2-12-19 Supervision	Compliant	Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.
Rule: 5180:2-12-19 Supervision	Compliant	Documenting Statement: During the inspection, child care staff were observed assisting children throughout the day.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	

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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cribs	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-22 Safe Food Handling/Storage	Compliant	Documenting Statement: Food was stored in a safe and sanitary manner.
Rule: 5180:2-12-22 Safe Food Handling/Storage	Compliant	Documenting Statement: All eating utensils were developmentally appropriate.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Fluid Milk Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-23 Infant Daily Care	Compliant	Documenting Statement: Appropriate daily written records for all infants were viewed.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-23 Diapering and Toilet Training	Compliant	Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the infant room.