Department of Children & Youth

Family Child Care 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 Little Dreamers Academy	Program Number 2190020697	Program Type FCC - Type B Home
Address 5860 Gaines Rd Cincinnati OH 45247		County HAMILTON

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 04/01/2026	Begin Time 8:17 AM	End Time 8:28 AM
Inspection Date 04/23/2026	Begin Time 2:03 PM	End Time 2:06 PM
Inspection Date 05/12/2026	Begin Time 2:34 PM	End Time 2:41 PM
Inspection Date 06/04/2026	Begin Time 10:09 AM	End Time 10:18 AM
Inspection Date 06/04/2026	Begin Time 11:08 AM	End Time 12:25 PM
Inspection Date 06/05/2026	Begin Time 9:31 AM	End Time 9:34 AM
Inspection Date 06/05/2026	Begin Time 8:55 AM	End Time 9:09 AM
Reviewer: Jacob Downard		
Reviewer: Jacob Downard		
Reviewer: Jacob Downard		
Reviewer: Jacob Downard		
Reviewer: Jacob Downard		
Reviewer: Jacob Downard		
Reviewer: Jacob Downard		

Department of Children & Youth

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	18	0	2	25

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		4	0	4
Total Under 2 Years	3	4	0	4
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	0	0
Total Capacity/Enrollment	6	0	0	4

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
6/4/2026		1 to 0	

Department of Children & Youth

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

Domain:

Rule:
Code:

Findings:

Corrective Action Plan Due:

Moderate Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Carbon Monoxide Detectors - Type B Only
Code: The program is required to meet all requirements for carbon monoxide detectors.

Findings: During the inspection, it was determined that the Type B Home did not have a working carbon monoxide detector in the basement and main level of the home. A working carbon monoxide detector must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 07/05/2026

Domain: 08 Staff Files

Rule: 5180:2-13-09 Background Checks
Code: Individuals associated to the program are required to request background checks.

Findings: In review of the staff records, it was determined that a resident of the home turned 18 years of age moved into the home and background checks were not requested within 10 business days. Submit the program's corrective action plan, which includes a copy of the resident's JFS 01176, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/05/2026

Ohio Department of Children & Youth

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-13-02 License Visible
Code: The program is required to have their license in a visible area.

Findings: During the inspection, it was determined the provider's current license was not in a location visible to parents, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/05/2026

Domain: 00 License & Approvals

Rule: 5180:2-13-02 Information in OCLQS
Code: The provider is required to keep their information current in OCLQS.

Findings: During the inspection, it was determined the information in numbers 2 and 4 below was not up to date in the Ohio Child Care Licensing and Quality System:

1. Mailing Address;
2. Telephone Number;
3. Email Address;
4. Days and Hours of Operation;
5. Services Offered;
6. Name of Program, If applicable.
7. Private pay rates.

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

Corrective Action Plan Due: 07/05/2026

Domain: 00 License & Approvals

Rule: 5180:2-13-03 Inspection Requirements

Ohio Department of Children & Youth

Code: The program is required to respond to all non-compliances by the date noted in the inspection report.

Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated [ ]. The rule requires the program 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: 07/05/2026

Domain: 00 License & Approvals

Rule: 5180:2-13-03 Inspection Requirements
Code: The program staff is required to cooperate with inspections and complaint investigations.

Findings: During the inspection, it was determined that program staff did not cooperate with the inspection in that children were tapped in on prior attempts to the home, provider was avoiding the inspection. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/05/2026

Domain: 00 License & Approvals

Rule: 5180:2-13-03 Inspection Requirements
Code: The program staff and residents are required to refrain from falsifying information.

Findings: During the inspection, it was determined that the program staff or residents provided false information, in that provider denied tapping children in, although she was in the tap image for children. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/05/2026

Domain: 00 License & Approvals

Rule: 5180:2-13-04 Fire Safety for Type B Homes
Code: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Findings: During the inspection, it was determined that the Type B Home did not have a working smoke alarm on the main level of the home. A working smoke alarm must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Ohio Department of Children & Youth

Corrective Action Plan Due: 07/05/2026

Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Attendance
Code: The program is required to have a tracking method for children.

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

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

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

Corrective Action Plan Due: 07/05/2026

Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Attendance
Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the program for a period of one year.

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

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

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

Corrective Action Plan Due: 07/05/2026

Ohio Department of Children & Youth

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 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.

Findings: Children in care shall be protected from any items and conditions which threaten their health, safety, and well being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well being as noted in the following number 1 and 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. Telephone cords.
7. Employee(s) purse(s).
8. Diaper bags.
9. Television not securely anchored.
10. Small or lightweight pieces of shelving units are not securely anchored to the wall.
11. Staff member stepped over a barrier/gate while holding a child.
12. Chipping or peeling paint.
13. An area rug did not have a nonskid backing.
14. An area rug presented a tripping hazard.
15. A floor surface was unsafe in that [ ].
16. No platform was provided for the sink or toilet.
17. The platform provided for the sink or toilet was not sturdy.
18. The platform provided for the sink or toilet posed a safety hazard in that [ ].
19. Emergency exits were blocked by the following furniture in that [ ].
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. Cleaning chemicals accessible to kids in bathrooms and on toy kitchen in basement

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

Corrective Action Plan Due: 07/05/2026

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Pets
Code: The program is required to properly care for pets and prevent any threat to the safety or health of the children by the pet.

Ohio Department of Children & Youth

Findings: During the inspection, it was determined pets at the program were not properly housed or cared for or posed a threat to the safety or health of the children as noted in numbers 5, 6, and 7 below:

1. The animal's cage was dirty with feces.
2. The aquarium was unclean.
3. The litter box was dirty with feces.
4. A pet posed a threat to the safety of a child in that [ ].
5. A pet requiring a license did not have a current license.
6. Proper inoculation records were not on file at the program for a pet requiring inoculations.
7. Children were exposed to the pet's urine and/or feces.
8. Other [ ].

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

Corrective Action Plan Due: 07/05/2026

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment
Code: The program is required to have running water below the temperature of 120 degrees Fahrenheit.

Findings: During the inspection, it was determined the water temperature was 125 degrees in the basement bathroom. This temperature exceeds the requirement of remaining below 120 degrees Fahrenheit. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 07/05/2026

Domain: 03 Postings & Equipment

Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan
Code: The program is required to post the fire and weather alert plan with a diagram.

Findings: During the inspection, it was determined 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.

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 07/05/2026

Ohio Department of Children & Youth

Domain: 03 Postings & Equipment

Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan
Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number 7 below:

1. The plan was not posted on each level of the home used for child care.
2. The name, address and telephone number of the program were not complete.
3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
4. 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.
5. Location of children's records was not complete.
6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.
7. The current version of the prescribed form was not used.
8. 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.

Corrective Action Plan Due: 07/05/2026

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Drills
Code: The program is required to complete and document the required drills.

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

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

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

Corrective Action Plan Due: 07/05/2026

Ohio Department of Children & Youth

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Preparedness and Response Plan
Code: The program is required to train child care staff members and employees on the written emergency preparedness and response plan annually and keep written documentation of the training on-site.

Findings: During the inspection, it was determined the program's written emergency and preparedness and response plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in numbers 1-2 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: 07/05/2026

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Preparedness and Response Plan
Code: The program is required to have a completed emergency preparedness and response plan.

Findings: During the inspection, it was determined the program's written emergency preparedness and response plan did not meet the requirement or was missing the information in number 1 below:
Procedures:
1. The written emergency and preparedness and response plan had not been completed
2. The plan was not provided to all child care staff and employees
3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism including a designated safe site where staff and children can safely remain when evacuated
5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats including a designated safe site where staff and children can safely remain when evacuated
6. Outbreaks, epidemics or other infectious disease emergencies
7. Loss of power, water, or heat
8. Other threatening situations that may pose a health or safety hazard to the children in the program
Details:
9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
10. Assisting infants, toddlers and children with special needs and/or health conditions
11. Emergency contact information for parents and the program
12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
13. Procedures for communicating with parents during loss of communications, no phone or internet service available
14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place

15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
16. Making the plan available to all child care staff members and employees
17. Training of staff or reassignment of staff duties as appropriate
18. Updating the plan on a yearly basis
19. Contact with local emergency management officials
20. The plan was unable to be implemented in that, [ ].

Submit the program's corrective action plan, which includes the missing information, if applicable, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/05/2026

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Communicable Diseases
Code: The program is required to post the Ohio Communicable Disease Chart in a noticeable area.

Findings: During the inspection, it was determined that the Ohio Communicable Disease Chart was not posted as required , as indicated in the number 2 below:

1. In a location readily available to provider, child care staff members, employees, and residents;
2. The chart was not posted.
3. The posted chart was not the current version.
4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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

Corrective Action Plan Due: 07/05/2026

Domain: 06 Program Information

Rule: 5180:2-13-14 Requirements for Field and Routine Trips
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.

Findings: 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 1 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 time(s) of the trip(s) (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.

Ohio Department of Children & Youth

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: [ ].

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

Corrective Action Plan Due: 07/05/2026

Domain: 08 Staff Files

Rule: 5180:2-13-07 Provider Responsibilities
Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" on file for each child in care.

Findings: During the inspection, it was determined the provider did not have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 07/05/2026

Domain: 08 Staff Files

Rule: 5180:2-13-07 Provider Responsibilities
Code: The provider is required to reside at the licensed location, not have additional activities or employment during the program's operating hours, be on-site at the program for at least 75 percent of the program's operating hours, and have hours of availability posted in a noticeable place.

Findings: During the inspection, it was determined that the provider was not meeting the following requirements as noted in number 2 below : Provider volunteers at farm during operation hours and works at a daycare center during her operation hours too.

1. The provider no longer resides at the licensed location.
2. The licensed provider has additional activities/employment during operating hours
3. The provider was not on-site for 75 percent of the program's operating hours as required by this rule.
4. The provider did not have hours of availability to meet with parents a noticeable location.

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 07/05/2026

Ohio Department of Children & Youth

Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training
Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number 14 below:

1. First Aid - expired training
2. First Aid - did not have verification of the completion of First Aid training
3. First Aid - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
4. CPR - expired training
5. CPR - had not taken CPR training
6. CPR - did not have verification of the completion of CPR training
7. CPR - training taken did not include all age groups and developmental levels of all children in care
8. CPR - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training
10. Communicable Disease - expired training
11. Communicable Disease - had not taken CD training
12. Communicable Disease - did not have verification of the completion of CD training
13. Communicable Disease - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
14. Child Abuse - expired training
15. Child Abuse - had not taken Child Abuse training
16. Child Abuse - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 07/05/2026

Domain: 08 Staff Files

Rule: 5180:2-13-07 Staff Records
Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number 2 below:
1. The provider had not created or updated their individual profile in the OPR.
2. The provider had not created or updated the program's organizational dashboard in the OPR.
3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.

Ohio Department of Children & Youth

4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.
7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.
10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.
11.Other: []
Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/05/2026

Domain: 08 Staff Files

Rule: 5180:2-13-07 Provider Responsibilities
Code: The program is required to notify the county agency of any change in the household composition.

Findings: During the inspection, it was determined the provider did not update OCLQS as noted in the following number 1 below:

1. A change in household composition including someone joining the household or leaving the household within five calendar days.
2. An individual staying in the home for more than ten consecutive calendar days.

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

Corrective Action Plan Due: 07/05/2026

Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records
Code: The program is required to have a completed medical on file for each child.

Ohio Department of Children & Youth

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 1 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified
nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases
required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of
conscience, including religious convictions
11. Other [ ]

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.
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Corrective Action Plan Due: 07/05/2026

Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records
Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review 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, 10, 12, 16, 17, 18, 14, 13, 19 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

Department of Children & Youth

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. Child first date at program missing
17. Not on current 1234 form
18. Child name missing from top of each form
19. Enrollment form not dated by parent and provider by the signature on page 4

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

Corrective Action Plan Due: 07/05/2026

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary Closure	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Requirements for Type B Homes	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable

5180:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B Home	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-05 Denial, Revocation, and Suspension	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and Procedures	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Type B Provider - Foster Parent	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff Requirements	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional Development	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Indoor Space	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable

Ohio Department of Children & Youth

5180:2-13-11 Outdoor Space	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and equipment	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Driver Requirements	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention and Confidentiality	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 First Aid Kit/Standard Precautions	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and Equipment	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Group Size and Ratios	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Supervision	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 School Age Supervision	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight Care	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap Requirements	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Crib and Playpen Requirements	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment and Hygiene	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Meals and Snacks	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Fluid Milk	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement:

Department of Children & Youth

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for Swimming	Compliant	Documenting Statement:

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication Requirements	Compliant	Documenting Statement: