Department of Education
Department of Job and Family Services

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 Little Sprouts Early Child Care Education North	Program Number 2220025760	Program Type Child Care Center
Address 1479 Morse Rd Coumbus OH 43229		County FRANKLIN

Building Approval Date	Use Group/Code E	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 02/05/2024	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 09/04/2024	Begin Time 7:30 AM	End Time 11:47 AM
Reviewer: ANNE BLANKESTYN		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	17	0	0	21

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		4	0	4
Total Under 2 ½ Years	50	10	0	10
Older Toddler		0	0	0
Preschool		8	0	8
School Age		11	0	11
Total Capacity/Enrollment	83	19	0	29

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

Toddler	0 to < 12 months	1 to 5	combined with Infant
Toddler	0 to < 12 months	1 to 5	combined with Infant
Infant	0 to < 12 months	1 to 3	
Infant	0 to < 12 months	1 to 5	combined with Toddler
Pre K	0 to < 12 months	2 to 7	all children combined with fewer than 12 children in the building
Pre K	0 to < 12 months	2 to 7	all children combined with fewer than 12 children in building
School Age	School-Age to < 11 years	1 to 2	
School Age	School-Age to < 11 years	1 to 2	

Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information
Code: The rule requires the program to keep their information current in OCLQS.

Finding: During the inspection, it was determined the information in number(s) 7 below was not up to date in the Ohio Child Licensing and Quality System (OCLQS):

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

Technical assistance was provided, and as discussed, log on to OCLQS and update the information, as required.

Corrective Action Plan Due: 10/04/2024

Domain: 00 License & Approvals

Rule: 5101:2-12-03 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 report dated August 29, 2023. 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: 10/04/2024

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records
Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 4 below:

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

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

Corrective Action Plan Due: 10/04/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 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(s) 5 below, as required in rule.

1. At least one staff/child did not wash their hands upon arrival for the day.
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 [ ].

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

Corrective Action Plan Due: 10/04/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment
Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 1 and 2 below:

1. Surge protectors/outlets did not have childproof receptacle covers in the Infant room, and an outlet uncovered in the Pre K room.
2. Open pull cords that are not closed loop. (Pre K room)
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.
6. Employee(s) purse(s).
7. Diaper bags.
8. Television not securely anchored.
9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
10. Smoke detector needing batteries replaced.
11. An area rug did not have a nonskid backing.

12. An area rug presented a tripping hazard.
13. A floor surface that was unsafe in that [ ].
14. No platform was provided for the sink or toilet in the [ ] classroom.
15. The platform provided for the sink or toilet in the [ ] classroom was not sturdy.
16. The platform provided for the sink or toilet in the [ ] classroom posed a safety hazard in that [ ].
17. Telephone cords.
18. Staff member stepped over a barrier/gate while holding a child.
19. Emergency exits were blocked by the following classroom furniture: [ ].
20. A mercury thermometer was being used to take a child's temperature.
21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
22. Other [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/04/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment
Code: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

Finding: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number(s) 1 and 3 below:

1. Manufacturer's guidelines for the infant bouncy seats were not followed in that infants who are able to sit up on their own were placed in the seats.
2. The straps were missing on the [ ].
3. The straps were attached, but were not used on the diaper changing pad in the Infant room.
4. The straps were attached and were used, but were not used in a safe manner.
5. The equipment had sharp points or corners.
6. The equipment had splinters.
7. The equipment had protruding nails.
8. The equipment had loose or rusty parts.
9. The equipment had paint which contains lead or other poisonous materials.
10. The equipment had hazardous features.
11. A fan was unstable and could easily tip over.
12. A fan had openings a finger could enter.
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: 10/04/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment
Code: The program is required to follow the cleaning schedule for equipment.

Finding: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number(s) 6 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: 10/04/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 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(s) 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: 10/04/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs
Code: The program is required to space cribs two feet apart when in use.

Finding: During the inspection, it was determined that cribs were not two feet apart when in use, as required by 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 not required at this time.

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements
Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 4, 5, and 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 name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1 and 2 below:

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

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

Corrective Action Plan Due: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Qualifications
Code: The program administrator is required to complete the rules course reivew within the defined time period.

Finding: 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.

Corrective Action Plan Due: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements
Code: The program is required to have a designated employee that has access to all records and handles emergencies in charge if the administrator is absent.

Finding: During the inspection, it was determined the role of the designee did not meet the requirements as noted in number(s) 1 below:

1. Have access to all records;
2. Handle all emergencies.

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: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements
Code: The program is required to have a designated child care staff member, who is at least 18 years of age, in charge if the administrator is absent.

Finding: During the inspection, it was determined the program did not meet the requirement for a designee during the administrator's absence as noted in number(s) 1 below:

1. A child care staff member had not been designated as the person in charge.
2. The child care staff member designated as the person in charge was not at least 18 years of age.
3. The child care staff member designated as the person in charge was not on the premises during the administrator's absence.

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: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements
Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 4 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: [ ]

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

Corrective Action Plan Due: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements
Code: The program is required to retain documentation for each employee who has left the program in the past three years.

Finding: During the inspection, it was determined that employment records were not maintained on file at the program for the current employees as well as for past employees who had left the program's employment in the past three years. 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: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements
Code: The program is required to maintain documentation onsite at the program for each employee.

Finding: During the inspection, it was determined that required staff record documentation was not on file at the program, and was not verified in the OPR, for the employee(s) listed on the Employee Record Chart. The documentation was able to be verified as noted in number(s) 2 below:

1. The information had been verified at the previous inspection.
2. The information was provided from another location during the inspection.

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

Corrective Action Plan Due: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement
Code: The program staff's medical statements are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 2 below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies the employee is:
a. Physically fit for employment in a program caring for children;
b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
c. Immunized against Measles, Mumps, and Rubella (MMR);
6. Tuberculosis (TB) screening/test information was missing:
a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
b. Results of a TB test for employees meeting both criteria in 6a.
c. Results of additional testing for employees with a positive TB test.
d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/04/2024

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements
Code: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

Finding: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 2 below:

1. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
2. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/04/2024

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-07 Written Program Policies and Procedures
Code: The program's policies and procedures are required to include all topics outlined in rule.

Finding: During the inspection, it was determined the program's written policies and procedures provided to the parents/guardians and employees was missing item number(s) 3, 10, 16, and 17 below:

General Information
1. Program name, address, email address and telephone number.
2. Description of the program's program philosophy.
3. Days and hours of operation, scheduled closings and basic daily schedule. (missing full day school age schedule)
4. Staff/child ratios and group size.
5. Opportunities for parent involvement in program activities.
6. Opportunities for parents to meet with teachers regarding their child.
7. Payment schedule, overtime charges and registration fees as applicable.
8. Supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

Program Policies and Procedures
9. Enrollment including required enrollment information.
10. Care of children without immunizations.
11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
12. Supervision of children, including a separate supervision policy for school-age children, if applicable.

13. Child guidance.
14. Suspension and expulsion.
15. Compliance with the Americans with Disabilities Act (ADA), including administering medication to children with disabilities and administering care procedures to children with disabilities.
16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.)
17. Food and dietary policy, including, information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals and snacks, and a policy on providing supplemental food.
18. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
19. Summary of procedures taken in the event of an emergency, serious illness or injury.
20. Administration of medication and topical products including medical foods, modified diets and whether school age children are permitted to carry their own medication and ointments.
21. Transportation for fieldtrips, routine trips (if applicable) and emergencies, including if the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
22. Water activities/swimming.
23. Infant care, if applicable, including feeding, frequency of diaper checks and information about daily activities.
24. Sleeping, Napping and Resting.
25. Evening and overnight care, if applicable.
26. Policy on hours of operation including closing due to weather, school delays or closings and any other factors.
27. Situations that may require disenrollment of a child, if applicable.
28. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the child care program.
29. Formal screenings and assessments on enrolled children and if the program reports child level data to ODJFS pursuant to 5101:2-17-02 of the Administrative Code.

Revise the program's written policies and procedures to include the missing information. Submit the program's corrective action plan, which includes the revised written policies and procedures, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/04/2024

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-16 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.

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(s) 1 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: 10/04/2024

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional Development Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule.
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	

Rule	Status	Documenting Statement(s), If applicable

Rule: 5101:2-12-21 Evening and Overnight Care	Compliant	Documenting Statement: The written security plan was reviewed.
Rule: 5101:2-12-21 Evening and Overnight Care	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding evening and overnight care were discussed.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet Training	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication Administration	Compliant	Documenting Statement: There were no children on medication at the time of the inspection; however, the method of storage and practices for the administration were reviewed.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	