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 CandyLand Childcare Center	Program Number 2220025951	Program Type Child Care Center
Address 2194 Romig Rd Akron OH 44320		County SUMMIT

Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
05/02/2022	E	92	28
Fire Inspection Approval Date 12/13/2023	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 02/28/2025	Begin Time 8:45 AM	End Time 1:00 PM
Inspection Date 02/28/2025	Begin Time 8:45 AM	End Time 1:00 PM
Reviewer: MICHELE FAKAN		
Reviewer: SHAWN CRAWFORD		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	15	0	2	17

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)		1	0	1
Young Toddler		2	0	2
Total Under 2 ½ Years	28	3	0	3
Older Toddler		1	0	1
Preschool		0	0	0
School Age		3	1	4
Total Capacity/Enrollment	47	4	1	8

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Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Jelly Beans- Infants	0 to < 12 months	1 to 1	
Jelly Beans- Infants	0 to < 12 months	1 to 1	Nap
Lollipops - PS	0 to < 12 months	3 to 3	Inf-PS combined Breakfast
Lollipops - PS	0 to < 12 months	2 to 6	Lunch- groups combined
Lollipops - PS	18 months to < 30 months	1 to 5	Nap Preschool/toddler combined

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

Domain: 06 Program Information

Rule: 5180:2-12-14 Transportation - Vehicle Requirements
Code: The program is required to use the correct vehicle type as specified in rule. The program is also required to have all vehicles used to transport children inspected by an ASE certified mechanic, FMCSA inspector or the State Highway patrol annually, and correct all repairs that are listed on the vehicle inspection report.

Finding: During the inspection, it was determined the program used a vehicle to transport children that was not approved and/or did not have a current annual vehicle inspection indicating the vehicle was mechanically safe as

noted in number(s) 2,4 below, in that an annual inspection was not able to be produced during the inspection for the :Cadillac XT6, and the inspection for the Chevy Traverse was dated 12/12/22.

1. The program used a converted cargo van or passenger vans designed to carry ten or more passengers. The program must cease the use of this vehicle immediately.
2. The vehicle was not inspected.
3. The vehicle was inspected by someone other than an ASE certified mechanic, federal motor carrier safety administration (FMCSA) safety inspector or the Ohio State Highway Patrol.
4. The vehicle inspection was not updated annually.
5. The vehicle inspection completed from the Ohio Highway Patrol did not meet the rule requirement.
6. The annual safety check of the vehicle(s) used by the program to transport children noted repairs or corrections that had not been completed and/or documented. The safety violations need to be corrected immediately.

Submit the program's corrective action plan, which includes either discontinuing the use of the vehicle, documentation for any new vehicle now being used to transport children, or a copy of the JFS 01230 "Vehicle Inspection Report for Child Care Centers", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/02/2025

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 number(s) 32,33 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.

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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.
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: 04/02/2025

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Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5180:2-12-18 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, in that the Gum Drop attendance record was observed on top of a shelf in the classroom when the mixed group was outside:

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: 04/02/2025

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(s) or condition(s) which may threaten their health, safety, or well-being as noted in numbers 1 and 12 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.

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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: 04/02/2025

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(s) 1,5,8 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: 04/02/2025

Domain: 03 Postings & Equipment

Rule: 5180:2-12-17 Materials and Equipment
Code: The program is required to have enough equipment for all children in care.

Finding: During the inspection, it was determined that equipment and materials in the following categories were not provided in sufficient quantities for children in the school age classroom, as required in number 11 below.

1. Art supplies (excludes infants)
2. Manipulative materials and equipment
3. Blocks
4. Science-nature equipment (excludes infants)
5. Language arts and auditory materials and equipment
6. Pretend or dramatic play materials
7. Music equipment
8. Transportation materials and equipment
9. Gross motor equipment
10. Sensory motor equipment
11. School age children were not provided sufficient equipment and materials in at least five of the first nine categories above.

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: 04/02/2025

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Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-12-11 Outdoor Play Equipment
Code: The program is required to provide equipment that does not pose a safety risk and must follow the manufacturer's guidelines for assembling, installing and using the equipment.

Finding: During the inspection, it was determined that outdoor play equipment was unsafe or not used as intended as noted in number(s) 14 below:

1. There was rust exposed.
2. There were protruding bolts.
3. There were cracks.
4. There were holes.
5. There was splintering wood.
6. There were sharp edges or points.
7. There were lead hazards.
8. There were toxic substances.
9. There were tripping hazards.
10. There was chipped and/or peeling paint.
11. The sandbox was not covered when the program was closed or during non-daylight hours.
12. Outdoor equipment, [ ] was not developmentally appropriate.
13. Outdoor equipment, [ ], was placed in the main traffic pattern.
14. Outdoor play equipment, 3 climbers on playground were positioned too closely together, posing a risk of injury if a child were to fall from one piece of equipment into another.
15. Outdoor equipment, [ ], was not securely anchored but did not present a risk of imminent danger of the structure collapsing when children are using the equipment
16. Outdoor equipment, [ ], was 30 inches or more from the ground and did not have a protective barrier that would prevent a child from falling off this piece of equipment.
17. The manufacturer's guidelines for assembly and installation were not followed for the [ ].
18. Functionally linked equipment was used by preschool-age children and the distance between two adjacent pieces of equipment exceeded 12 inches.
19. Functionally linked equipment was used by school-age children and the distance between two adjacent pieces of equipment exceeded 18 inches.
20. Other [ ].

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

Corrective Action Plan Due: 04/02/2025

Domain: 05 Health & Safety

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Rule: 5180:2-12-16 Management of Communicable Disease
Code: The program is required to identify and respond to communicable diseases.

Finding: During the inspection, it was determined the program did not meet the requirements for responding to a communicable disease as noted in number 1 below.

1. The program did not follow the instructions on the JFS 08087 "Ohio Communicable Disease Chart".
2. The program did not report a communicable disease that is required to be reported to the local health department to ODJFS in OCLQS by the end of the next business day.

Technical assistance was provided at the time of 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: 04/02/2025

Domain: 06 Program Information

Rule: 5180:2-12-21 Evening and Overnight Care
Code: The program is required to provide children with hygiene items if the child has a bedtime routine occurring at the program.

Finding: During the inspection, it was determined that children who have a bedtime routine occurring at the program were not provided with the item(s) noted in numbers 1 and below, as required:

1. Clean, individual, individually labeled washcloths.
2. Clean, individual, individually labeled towels.
3. Toothbrushes.

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: 04/02/2025

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.

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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(s) 10 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.
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: 04/02/2025

Domain: 06 Program Information

Rule: 5180:2-12-21 Evening and Overnight Care
Code: The program is required to collaborate with parents to develop bedtime routines for children. The program must follow the bedtime routine.

Finding: During the inspection, it was determined that children's bedtime routines did not meet the requirement as noted in number(s) 1 below:

1. The bedtime routine was not developed in collaboration with parents.
2. The bedtime routine was not followed.

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: 04/02/2025

Domain: 06 Program Information

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Rule: 5180:2-12-21 Evening and Overnight Care
Code: The program is required to have a written security plan, limiting the access to the program to only parents/guardians of children in care and authorized persons.

Finding: During the inspection, it was determined that the program did not provide a written security plan that ensures that access to the program is limited to parents and guardians of children in care and authorized persons. The plan shall ensure that children are supervised at all times during the limited access hours. Submit the program's corrective action plan, which includes a copy of the written security plan, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/02/2025

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 2,5, and 6 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: 04/02/2025

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Domain: 08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements
Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in numbers 2, 5, 10, and 13 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of 6:30 am- 7 am, 4 - 6 pm and 10 pm to close on Monday and Tuesday. Wednesday 6 pm - close, Thursday 4-6 pm, Friday 6:30 am-7 am, 1-6 pm, and 10 pm - close, and no one on Saturday had verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
5. CPR – childcare staff scheduled Monday 6:30 am-7 am, 10 pm -close; Tuesday 6:30 am-7 am, 4-6 pm, and 10 pm- close, Wednesday 4-6 pm Friday 6:30 am- 7am, and 10 pm - close and no one on Saturday had verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [ ] and [ ] had expired training
10. Communicable Disease – childcare staff scheduled Monday Tuesday and Friday 6:30 am- 7am, Friday 4-6 pm and no one on Saturday had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
13. Child Abuse – child care staff scheduled Monday 6:30am-8 am, 2-10 pm, Tuesday 6:30 am-8 am, 6 pm - close, Wednesday 6:30 - 8 am, 10 pm - close, Thursday 6:30 am-8 am, Friday 6:30 am- 7 am, and no one on Saturday had not taken Child Abuse training.
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/02/2025

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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, 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: 04/02/2025

Domain: 08 Staff Files

Rule: 5180:2-12-10 Professional Development Requirements
Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
6. 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: 04/02/2025

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 5 and 6 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: 04/02/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans
Code: The program is required to ensure that there is at least one child care staff member who has signed the JFS 01236 "Child Medical/Physical Care Plan for Child Care" caring for the child at all times when a child with a health condition is present.

Finding: During the inspection, it was determined a child with a condition that required a JFS 01236 "Child Medical/Physical Care Plan" had been present and the program did not ensure there was at least one child care staff member caring for the child at all times who had signed the JFS 01236 on the child's condition. 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: 04/02/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Child Medical and Enrollment Records
Code: The program is required to have a completed medical on file at the program for each child enrolled.

Finding: In review of 25% 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(s) 7,8 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.

Corrective Action Plan Due: 04/02/2025

Ohio Department of Children & Youth

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: Annual training of the written disaster plan was completed by staff.
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.

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 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(s).

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).

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must

		be secured for the program. Secure a new fire inspection by 11/15/25.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: KWET-D2UQF and expires 3/1/2025.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator Qualifications	Compliant	

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
5180:2-12-08 Child Care Staff Member Educational Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-09 Background Check Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space Requirements	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence.
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed

		and documented, as required. The most recent inspection report form was dated 1/2/25.
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: Shade is provided by means of an awning.

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

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 rubber mulch.

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free Environment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Toothbrushing Requirements	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding toothbrushing were discussed.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation - Driver Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	

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 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Schedule	Compliant	

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
5180:2-12-17 Daily Outdoor Play	Compliant	

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: During the inspection, enough Child Care Staff Members were employed to meet the staff/child ratios.
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: Staff/child ratios were not doubled during nap time.
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: 5180:2-12-20 Cots and Napping	Compliant	Documenting Statement: The mats were disinfected daily.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-19 Supervision	Compliant	Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-19 Child Guidance	Compliant	Documenting Statement: Appropriate child guidance techniques and practices were observed being used during the inspection.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were placed 2 feet apart.
Rule: 5180:2-12-20 Cribs	Compliant	Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier.
Rule: 5180:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were labeled with the assigned infant's name.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack Requirements	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
Rule: 5180:2-12-22 Fluid Milk Requirements	Compliant	Documenting Statement: All infants/toddlers were served formula/milk in sufficient amounts to meet the nutritional requirements.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-23 Infant Daily Care	Compliant	Documenting Statement: An appropriate program of activities with infants was observed.
Rule: 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 Infant Bottle and Food Preparation	Compliant	Documenting Statement: The container used to heat bottles is emptied and cleaned each day.
Rule: 5180:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: All bottles were labeled as required.
Rule: 5180:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: All bottles were warmed in accordance with the rule in a bottle warmer.
Rule: 5180:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: Bottles and opened food were stored in a refrigerator located in the classroom.
Rule: 5180:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: Infants were fed in conformity with parent/guardian's written, dated instructions.
Rule: 5180:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: The program staff followed all required procedures for infant formula, food preparation and food service.

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(s).

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-24 Swimming and Water Safety Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-25 Medication Administration	Compliant	Documenting Statement: Medication was stored cabinet in office area.