Department of Children & Youth

Licensing Inspection Full Report

All licensed early care and education programs are inspected at least once each year. Non-compliances are documented and grouped by risk level. Documenting statements, technical assistance provided and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the Department of Children & Youth website at https://childcaresearch.ohio.gov/ . This includes complaint investigation reports with substantiated allegations. For any other early care and education records, please contact the Family and Customer Support Center at 1-844-234-5437.

Program Details		
Program Name Healthy Homes and Hearts INC	Program Number 2240031282	Program Type Child Care Center
Address 413 E. Home Road Springfield OH 45506		County CLARK

Inspection Information			
Inspection Type Provisional	Inspection Scope Full	Inspection Method On-site Inspection	Inspection Notice Unannounced
Inspection Date 11/18/2025	Begin Time 9:30 AM	End Time 12:05 PM	Reviewer: HEATHER STILLION

Summary of Findings			
No. Requirements Verified 58	No. Requirements with Non-compliances 16		No. Requirements Compliant 32
No. Serious Risk 0	No. Moderate Risk Findings 6	No. Other Non-compliance Findings 14	No. Technical Assistance Provided 0

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		0	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		1	0	1
Preschool		1	0	1
School Age		11	0	11
Total Capacity/Enrollment	13	13	0	13

Department of Children & Youth

Staff-Child Ratios at the Time of Inspection				
Group	**Age Group/Range**	**Ratio Observed**	**Compliance**	**Comment**
Preschool		1 to 2		
Preschool		1 to 2		
Schoolage		2 to 4		
Schoolage		2 to 12		

Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5180:2-12-03, 5180:2-13-03, 5180:2-19-10 and 5180:2-20-02 detail the process for submitting a request for review. The request for review must be submitted within ten business days from the receipt of the licensing report. In addition, if the program is Step Up To Quality rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances

A serious risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

No serious risk non-compliances were observed during this inspection

Moderate Risk Non-Compliances

A moderate risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

Domain: 00 License & Approvals

Rule: 5180:2-12-04 Fire Inspection

Requirement: The program is required to have all spaces used for child care inspected by the fire department or the state fire marshal's office prior to serving children. The program is required to obtain a fire inspection without any

uncorrected violations within 12 months from the date of the last fire inspection. If violations are noted during the inspection, the program is required to have all violations corrected and have the program re-inspected to obtain a completed fire form.

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

1. The program did not have documentation on file for a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection and the request for the new inspection was not made at least 30 days prior to the expiration of the previous fire inspection.

2. The documentation for the most recent fire inspection contained violations that had not been corrected.

3. The [ ] space was being used and had not been approved by the fire department or the state fire marshal's office for child care.

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

Corrective Action Plan Due: 12/18/2025

Domain: **00 License & Approvals**

Rule: 5180:2-12-18 License Capacity

Requirement: The program is required to maintain the capacity that is indicated on the license.

Finding: During the inspection, it was determined that there were 14 total children with 0 children under 2 1/2. The program is currently licensed to serve 13 total children, with no more than 0 children under 2 1/2. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/18/2025

Domain: **04 Indoor/Outdoor Space**

Rule: 5180:2-12-11 Outdoor Play Fall Zones

Requirement: The program is required to provide adequate fall surface for the outdoor play space.

Finding: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in number(s) 1 below:

1. No fall surface

2. Adequate fall surface to soften the impact of a fall

3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone

4. Other [ ]

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/18/2025

Domain: **06 Program Information**

Rule: 5180:2-12-14 Transportation - Vehicle Requirements

Requirement: 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) 3 below:

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: 12/18/2025

Domain: **08 Staff Files**

Rule: 5180:2-12-09 Background Check Requirements

Requirement: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 1,2,3 below:

1. The request for a background check for child care was not submitted in the OPR.

2. The fingerprints were not submitted electronically according to the process established by BCI.

3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.

4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**

Rule: 5180:2-12-09 Background Check Requirements

Requirement: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Finding: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the school-age group(s) and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/18/2025

Other Non-Compliances

This section includes other rule violations that are observable and/or based on facts.

Domain: **00 License & Approvals**

Rule: 5180:2-12-02 License Posted

Requirement: The rule requires the license to be visible to parents at all times.

Finding: During the inspection, it was determined the program's license was not in a location visible to parents as required. 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.

Corrective Action Plan Due: 12/18/2025

Domain: **02 Safe & Sanitary Environment**

Rule: 5180:2-12-13 Sanitary Equipment and Environment

Requirement: The program is required to provide a clean restroom with the appropriate materials available.

Finding: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 4 below, were in the center restroom:

1. There was no liquid soap.

2. There was no toilet paper.

3. There were no paper towels.

4. The toilet cleaning brush was accessible to the children.

5. The plunger was accessible to the children.

6. The toilet(s) were not flushed.

7. The trash was not emptied from the day before.

8. There was a strong urine odor.

9. Other [ ].

The restroom(s) must be kept sanitary at all times. 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.

Corrective Action Plan Due: 12/18/2025

Domain: **02 Safe & Sanitary Environment**

Rule: 5180:2-12-12 Safe Environment

Requirement: 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 below:

1. Surge protectors/outlets did not have childproof receptacle covers.

2. Open pull cords that are not closed loop.

3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.

4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.

5. Stacked chairs.

6. Employee(s) purse(s).

7. Diaper bags.

8. Television not securely anchored.

9. Small or lightweight pieces of shelving units are not securely anchored to the wall.

10. Smoke detector needing batteries replaced.

11. An area rug did not have a nonskid backing.

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: 12/18/2025

Domain: **03 Postings & Equipment**

Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan

Requirement: The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.

Finding: During the inspection it was determined that the current JFS 01201 "Dental First Aid" was not posted in a location readily available to center staff and parents as required. 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.

Corrective Action Plan Due: 12/18/2025

Domain: **03 Postings & Equipment**

Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan

Requirement: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

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

1. The plan was not posted in each classroom.

2. The plan was not posted in other spaces used by children.

3. The name, address and telephone number of the program were not complete.

4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.

5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.

6. Location of children's records was not complete.

7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.

8. The current version of the prescribed form was not used.

9. The plan was not implemented when necessary in that [ ].

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

Corrective Action Plan Due: 12/18/2025

Domain: **06 Program Information**

Rule: 5180:2-12-14 Transportation - Driver Requirements

Requirement: The program is required to have all drivers be an employee of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program.

Finding: During the inspection, it was determined that the requirements for drivers was not met as listed in number(s) 2 below:

1. The driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.

2. At least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.

3. The driver used to transport children was not an employee of the program, a public transportation driver, or employed by a company contracted to provide transportation service.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/18/2025

Domain: **06 Program Information**

Rule: 5180:2-12-14 Transportation and Field Trip Procedures

Requirement: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

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

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 not required at this time.

Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**

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

Requirement: The program administrator is required to have hours of availability to meet with parents and have the hours posted in a noticeable location.

Finding: During the inspection, it was determined that the administrator did not have scheduled hours of availability to meet with parents, or the hours of availability were not posted in a noticeable location. 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.

Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**

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

Requirement: The program staff is required to have educational verification on file at the program.

Finding: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1 below:

1. Verification of completion of a high school education was not on file.

2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.

3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.

4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

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

Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**

Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection

Requirement: 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 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: 12/18/2025

Domain: **08 Staff Files**

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

Requirement: 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) 1,2,5,6,7 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: 12/18/2025

Domain: **08 Staff Files**

Rule: 5180:2-12-08 Medical Statement

Requirement: 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) 1 & 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: 12/18/2025

Domain: **09 Children's Files**

Rule: 5180:2-12-15 Child Medical and Enrollment Records

Requirement: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .

Finding: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 1 below.

1. No enrollment form was completed for at least one child

2. The current JFS 01234 was not completed for at least one child

3. Complete child information

4. Complete parent information

5. Complete emergency contact information

6. Complete physician information

7. Information regarding the parent list

8. Health information

9. Additional information for all boxes checked “yes”

10. Emergency transportation information

11. Parent/guardian’s signature

12. Diapering Statement

13. Acknowledgement of Policies and Procedures

14. Enrollment form for at least one child was not updated by either the parent or the administrator

15. Enrollment form for at least one child was not signed by the administrator

16. Other [ ]

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Corrective Action Plan Due: 12/18/2025

Domain: **09 Children's Files**

Rule: 5180:2-12-15 Child Medical and Enrollment Records

Requirement: 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) 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.

Corrective Action Plan Due: 12/18/2025

Domain: **00 License & Approvals**
Rule: 5180:2-12-04 Fire Inspection
Requirement:The program is required to have all spaces used for child care inspected by the fire department or the state fire marshal's office prior to serving children. The program is required to obtain a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection. If violations are noted during the inspection, the program is required to have all violations corrected and have the program re-inspected to obtain a completed fire form.
Findings:During the inspection, it was determined the program did not meet the requirements for fire inspection as noted in number(s) 1 below:

1. The program did not have documentation on file for a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection and the request for the new inspection was not made at least 30 days prior to the expiration of the previous fire inspection.
2. The documentation for the most recent fire inspection contained violations that had not been corrected.
3. The [ ] space was being used and had not been approved by the fire department or the state fire marshal's office for child care.

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

Corrective Action Plan Due: 12/18/2025

Domain: **00 License & Approvals**
Rule: 5180:2-12-18 License Capacity
Requirement:The program is required to maintain the capacity that is indicated on the license.
Findings:During the inspection, it was determined that there were 14 total children with 0 children under 2 1/2. The program is currently licensed to serve 13 total children, with no more than 0 children under 2 1/2. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 12/18/2025

Domain: **02 Safe & Sanitary Environment**
Rule: 5180:2-12-13 Sanitary Equipment and Environment
Requirement:The program is required to provide a clean restroom with the appropriate materials available.
Findings:During the inspection, it was determined that unsanitary conditions, as noted in number(s) 4 below, were in the center restroom:

1. There was no liquid soap.
2. There was no toilet paper.
3. There were no paper towels.
4. The toilet cleaning brush was accessible to the children.
5. The plunger was accessible to the children.
6. The toilet(s) were not flushed.
7. The trash was not emptied from the day before.
8. There was a strong urine odor.
9. Other [ ].

The restroom(s) must be kept sanitary at all times. 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.
Corrective Action Plan Due: 12/18/2025

Domain: **02 Safe & Sanitary Environment**
Rule: 5180:2-12-12 Safe Environment
Requirement: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: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 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.

6. Employee(s) purse(s).
7. Diaper bags.
8. Television not securely anchored.
9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
10. Smoke detector needing batteries replaced.
11. An area rug did not have a nonskid backing.
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: 12/18/2025

Domain: **03 Postings & Equipment**
Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan
Requirement:The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.
Findings:During the inspection it was determined that the current JFS 01201 "Dental First Aid" was not posted in a location readily available to center staff and parents as required. 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.
Corrective Action Plan Due: 12/18/2025

Domain: **03 Postings & Equipment**
Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan
Requirement:The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.
Findings:During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number(s) 1 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.

5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [ ].

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 12/18/2025

Domain: **04 Indoor/Outdoor Space**
Rule: 5180:2-12-11 Outdoor Play Fall Zones
Requirement:The program is required to provide adequate fall surface for the outdoor play space.
Findings:During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in number(s) 1 below:

1. No fall surface
2. Adequate fall surface to soften the impact of a fall
3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone
4. Other [ ]

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 12/18/2025

Domain: **06 Program Information**
Rule: 5180:2-12-14 Transportation and Field Trip Procedures
Requirement: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(s) 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.

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 not required at this time.
Corrective Action Plan Due: 12/18/2025

Domain: **06 Program Information**
Rule: 5180:2-12-14 Transportation - Vehicle Requirements
Requirement: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.
Findings: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) 3 below:

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: 12/18/2025

Domain: **06 Program Information**
Rule: 5180:2-12-14 Transportation - Driver Requirements
Requirement:The program is required to have all drivers be an employee of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program.
Findings:During the inspection, it was determined that the requirements for drivers was not met as listed in number(s) 2 below:

1. The driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.

2. At least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.
3. The driver used to transport children was not an employee of the program, a public transportation driver, or employed by a company contracted to provide transportation service.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**
Rule: 5180:2-12-07 Administrator Responsibilities/Requirements
Requirement:The program administrator is required to maintain current employee records in the Ohio Professional Registry.
Findings:During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 1,2,5,6,7 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: 12/18/2025

Domain: **08 Staff Files**
Rule: 5180:2-12-08 Medical Statement
Requirement:The program staff's medical statements are required to be completed and on file at the program.
Findings: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) 1 & 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: 12/18/2025

Domain: **08 Staff Files**
Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements
Requirement:The program staff is required to have educational verification on file at the program.
Findings:In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**
Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection
Requirement: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.
Findings: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 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: 12/18/2025

Domain: **08 Staff Files**
Rule: 5180:2-12-09 Background Check Requirements
Requirement:The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.
Findings:In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 1,2,3 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**
Rule: 5180:2-12-09 Background Check Requirements
Requirement:The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.
Findings:During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the school-age group(s) and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 12/18/2025

Domain: **08 Staff Files**
Rule: 5180:2-12-07 Administrator Responsibilities/Requirements
Requirement:The program administrator is required to have hours of availability to meet with parents and have the hours posted in a noticeable location.
Findings:During the inspection, it was determined that the administrator did not have scheduled hours of availability to meet with parents, or the hours of availability were not posted in a noticeable location. 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.
Corrective Action Plan Due: 12/18/2025

Domain: **09 Children's Files**
Rule: 5180:2-12-15 Child Medical and Enrollment Records
Requirement:The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .
Findings:In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 “Child Enrollment and Health Information For Child Care”, as required, for the items in number(s) 1 below.

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

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.
Corrective Action Plan Due: 12/18/2025

Domain: **09 Children's Files**
Rule: 5180:2-12-15 Child Medical and Enrollment Records
Requirement:The program is required to have a completed medical on file at the program for each child enrolled.
Findings: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) 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.
Corrective Action Plan Due: 12/18/2025

Technical Assistance Provided

This section documents technical assistance provided to the program when the program demonstrated an overall level of compliance with a rule requirement.

In Compliance/Not Verified/Previously Verified/Not Applicable

This section documents rule requirements that were assessed as fully compliant, previously verified, not verified during this inspection or not applicable to the program.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Written Disaster Plan	Previously Verified	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	

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 Food Service Requirements	Compliant	Documenting Statement: The program has obtained a food service exemption status from the local health department.

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-05 Denial, Revocation and Suspension	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program Policies and Procedures	Previously Verified	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Health Training Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional Development Requirements	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Space 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	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	

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

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

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Toothbrushing Requirements	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 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
5180:2-12-16 Emergency Drills	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 First Aid/Standard Precautions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of Communicable Disease	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury Reporting	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Attendance Records	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and Equipment	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Ratio	Compliant	

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

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cribs	Not Applicable	

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food Handling/Storage	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-21 Evening and Overnight Care	Not Applicable	

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Infant Daily Care	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Diapering and Toilet Training	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Infant Bottle and Food Preparation	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-24 Swimming and Water Safety Requirements	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-25 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
5180:2-12-04 Building Department Inspection	Compliant	