Program Guide
To Keeping Ohio’s Children Safe and Healthy

Child Care Licensing
Serious Risk
Non-compliances
The Bureau of Child Care and Development recognizes that in order for children to be able to grow and learn, they must be cared for in environments that are safe and healthy.

Child care licensing regulations are designed to reduce the risk of harm to children while they are participating in out of home care. In examining national research, state statistics, and the best practices of states that have been recognized as having effective licensing systems, Ohio has identified those rule areas which could lead to the greatest risk of harm. These rules were also looked at through the lens meeting the following three criteria: any non-compliances must be observable, not inferable; they must truly lead to the greatest risk of harm to children; and they must be defendable.

These rules, if violated, could immediately endanger the health and safety of children in care. In examining these rules, it is clear that they fall into three distinct categories: Lack of Supervision, Administrative Negligence, and Environmental Hazards. Each of these categories has been further divided into three subcategories. It is the goal that by dividing the serious risk rules in this manner, it will assist programs in devising and implementing systems which will assure that children are in the safest and healthiest environments possible.

Ohio is moving toward a weighted licensing system and identifying the serious risk non-compliances is the first step in that process.

This guide has been developed for providers to use as a tool to help focus on those areas of rules which present the greatest risk of harm to children. It is not meant to minimize those licensing rules not included. On the following pages the specific rule non-compliances which fall into each of the subcategories are described.
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5101:2-12-18: Transportation and Field Trip Safety

Children shall never be left alone or unattended in a vehicle.

- In order to provide safe field trip and transportation experiences for children, it is essential that center personnel have in place careful, proactive practices. This includes developing systems to assure that center personnel are checking vehicles at all destinations to make sure children have not been left on the vehicle. Additionally, if staff need to determine the whereabouts of children upon pick-up from another location, this should be done without leaving children unattended in a vehicle.

Helpful Hints:
- Keep a list of telephone numbers for all schools from which the center is picking up children. If a child does not arrive at the vehicle from the school, staff can then easily use their cell phones to call the school. This way staff can determine the location of the missing child, without having to take the remaining children off the vehicle to locate the missing child.
- Train staff on how to utilize the sample checklists (JFS 01213 Guidelines for Transportation/Fieldtrip Safety and JFS 01232 Field Trip Checklist) in order to assure all field trip requirements, including checking the vehicle for children, are met.
- Have a sign-off sheet hanging in the back of the vehicle so that staff must look in every seat before reaching the rear of the vehicle to document that no children are remaining.

- Second adult provisions must be met, based on the age of the child, during all routine and walking field trips, and when children are transported by vehicle. If the second adult does not have a complete staff file, they may not be used to count in ratio.

  - A second adult must be present for every five infants.
  - A second adult must be present for any combination of seven or more toddlers, preschool, and school children.
  - A second adult must be present for every ten school children, if only school age children are being transported. Or, the driver shall have a way to immediately contact another adult (cell phone).
  - A sample form (JFS 01267 Transportation/Field Trip Safety Ratio/Second Adult Requirements) is available as a resource to understanding ratio and second adult requirements.

5101:2-12-20: Supervision/Staff/Child Ratios and Grouping

No child shall ever be left alone or unsupervised. Children shall be within sight and hearing of child care staff members at all times.

- Staff need to be aware that supervision of children is necessary at all times of the day. This includes during times of transition, at nap time, and inside and outside the building. Staff need to have an awareness of the entire group for whom they are responsible.
- Attendance sheets should always remain with groups of children, so staff can quickly know how many children they are responsible for.
- Electronic monitors and mirrors do not take the place of visual and auditory supervision.
• If a child is isolated from other children due to illness, the child must remain with a staff member until the parent/guardian arrives. (Example: If a child is taken to the administrator’s office, someone needs to remain in the office with the child until the parent/guardian arrives.)

Helpful Hints:

- During times of transition, it is advisable to have one staff member in the front of the group, and the other in the rear.
- Face to name counts (staff member calls a child’s name from the attendance sheet, and visually verifies that the child is present) should be taken often. Before leaving a location and upon arrival at another destination, face to name counts should be taken to assure all children have remained with the group.
- If a group of children are going to be split up, each staff member should have a written list of the children they are responsible for while the group is apart.
- Systems need to be devised to assure that children do not leave the classroom without a staff member. If children need access to personal belongings, these items should be stored in the classroom to assure children are not leaving the classroom in order to retrieve items. If it is not possible to keep personal belongings in the classroom (may have cubbies located in the hallway outside of the classroom), staff need to stand in the doorway of the classroom in order to observe the children while they are in the hallway, while still maintaining classroom supervision.
- If children need to use a restroom located in a hallway outside of the classroom, the staff member must stand in the doorway in order to supervise both the children entering and exiting the restroom, and the children in the classroom. The center must have a system in place to contact another staff member, if the child needs assistance in the restroom, so that ratios can be maintained in the classroom. Only preschool and school age children are permitted to use a restroom in this manner.

Note: Provisions for supervision of school age children still apply.

☐ Staff members need to be aware of children who are arriving at the program from another program or location other than with their parents. If these children do not arrive as expected, the written plan which the center has developed in order to account for the absence of the children, needs to be implemented. Staff need to supervise children who are leaving the program to go to another location.

- When children arrive from another location, staff must meet them at their point of arrival and accompany them into the classroom (bus stop if applicable).
- If children leave the program, staff must assure they are supervised until they reach their next destination.

Helpful Hints:

- Keep a list of the contact people and the telephone numbers for the location where children were prior to their arrival (school, girl/boy scout leaders, etc.). This way, the whereabouts of the child can be quickly determined without having to search for contacts and telephone numbers.
- Programs located within school buildings should check with school personnel, prior to children’s arrival, to determine if any children went home early, or were not at school that day.
- Keep a notebook available at the parent table, so parents have an easy means of providing written notification of a child’s upcoming absence.

☐ Whenever seven or more children are present, there shall be a second adult present who is available in the building, and is able to be summoned without leaving the children unsupervised.
• There must always be at least one staff member present, and ratios must be maintained at all times.
• The individual acting as the second adult must have a signed JFS 01329 Statement of Nonconviction form on file.
• The individual acting as a second adult cannot be counted in ratio unless they have a complete staff file.

Helpful Hints:
- During opening and closing hours, which are typically the time periods when a second adult may be needed, staff should track how many children are present before a second adult arrives. If attendance patterns change, the second adult schedule will need to be modified accordingly.
- The center must develop a means to contact the second adult in the building, without leaving the children unattended. A cell phone, walkie talkies, or an intercom system could be used. The center could also have a loud horn or bell which could be sounded in the building to alert the second adult that they are needed.

5101:2-12-23: Evening and Overnight Care

☐ Child care staff members shall remain awake at all times, and shall supervise sleeping children.

• Children may never be left alone or unsupervised, whether they are awake or asleep.
• Staff members may not double ratios during evening and overnight care. Unlike naptime ratios, which are permitted to be doubled for 1 ½ hours during the day, ratio requirements must be maintained during all hours of care between 7:00 p.m. and 6:00 a.m.

Helpful Hints:
- If the classroom space is away from the entrance, and the doors are locked, the program must have a second adult present to allow access. This is especially important during hours when children are sleeping, because staff would be unable to take the children with them to allow entry.

Ratios Shall Be Maintained At All Times

5101:2-12-17: Swimming and Water Safety Requirements

☐ Any time children participate in activities in bodies of water two or more feet in depth, they must be supervised by an individual who is certified as a lifeguard by the American Red Cross or an equivalent water safety program.

☐ There must be one lifeguard for every 35 children at a private or on-site pool.

☐ If a staff member is acting as the lifeguard, they cannot be counted in ratio during the swimming activity.

5101:2-12-18: Transportation and Field Trip Safety

☐ Staff/child ratios must be maintained on all walking and routine field trips. If the bus driver is being used to maintain ratio, they must meet all child care staff requirements and have a complete file.

• A sample form (JFS 01267 Transportation/Field Trip Safety Ratio/Second Adult Requirements) is available as a resource to understand ratio and second adult requirements.
Staff/child ratios must be maintained at the destination of all field trips. If the second adult on the field trip is used to maintain ratio, they must meet all child care staff requirements and have a complete file.

5101:2-12-20: Supervision/Staff/Child Ratios and Grouping

Staff/child ratios shall be maintained at all times.

- Ratios may be doubled once, during a 24 hour period, for 1 ½ hours, during nap time. There must be a staff member present with the children, and all children must be resting on their cots. This does not apply to groups of children containing infants. If an infant has been moved into the toddler room for purposes of transitioning into the next oldest age group, the ratio cannot be doubled during nap time, until the child turns 18 months of age.
- The youngest child in the group determines the ratio which must be maintained.
- If there is only one child, two and a half years of age or older, assigned to the next oldest age group, the center may follow the ratio of the older age group. This does not apply to any groups, including infants, where children are younger than two and a half years of age.

- The center should devise a plan that describes to staff what to do if a child arrives at the center, resulting in the group being out of ratio. The center should have a person designated to be contacted that can arrange for an additional staff member to assist in the room, and to contact a substitute if needed.
- Periodic checks should be done by the administrator with staff who open and close to determine if additional staff may be needed during these periods, due to changes in children’s arrival or departure schedules.

If a center chooses to double ratios during nap time, there must be enough staff members present in the building to maintain ratios for the children who are present.

- In order to double ratios at naptime, children must be resting quietly on their cots. Staff should not leave for breaks while children are still eating, using the restroom, or preparing for naps.

Helpful Hints:
- As staff schedules are devised, it is imperative that consideration be given to staff members who may leave the building during their break times.
- It is necessary to periodically review and update schedules to assure that in the event of an emergency, there are enough staff in the building to provide assistance.

Children Shall Be Actively Supervised

5101:2-12-14: Outdoor Play

If a staff member is outside alone with a group of children, he/she must be able to summon help without leaving the group of children unattended.

If a program does not have an onsite play space, and is required to use a space/park away from the center in order to fulfill this rule requirement, they must assure that children are properly supervised during travel, and that the route they are using does not present a risk to children.

Helpful Hints:
- Staff members should only use the route which has been approved in order to travel to the park/play space. Staff should be attentive to potential hazards such as:
  - Bodies of water and traffic
  - Railroad tracks or crossings
  - Crossing parking lots, blind driveways, or exits/entrances to facilities
  - Walking between parked vehicles
Individuals who approach children in a threatening manner, or who are exhibiting a behavior or action which could be harmful

- If children need to cross streets, crosswalks should always be used when available, and all traffic laws must be followed. If a route needs to be altered, due to hazardous construction, or other changes which may occur, it is recommended that staff confer with the licensing specialist to assure the alternative route meets the rule requirement.

5101:2-12-17: Swimming and Water Safety Requirements

☐ Swimming sites must be inaccessible to children who are not supervised by a child care staff member.

☐ Staff members and other adults responsible for supervising the children must be able to clearly see the entire swimming area, including the bottom.

☐ Staff must be actively supervising children while swimming.

Helpful Hints

- Research shows that the risk of harm to children is elevated both when children participate in activities away from the center, and when they participate in activities which involve water. It is essential that staff are aware of the elevated risks, and that the program takes the necessary steps to ensure children’s safety during these types of activities. Staff need to be aware of the location of all children for whom they are responsible, and maintain visual contact with them at all times. While they are supervising, staff must closely watch children and not be engaged in conversations with adults and/or children which would cause them to be distracted from their supervisory responsibilities. It is recommended that staff do not use cell phones, read, or use head phones while responsible for supervising children. Staff must be near enough to the children, when they are in the water, that they can quickly intervene and respond to a child who is in distress.

Administrative Negligence

Children Shall be Cared for by Qualified Personnel

5101:2-12-09: Actions of the Director

☐ All center personnel, including the owner, administrator, employees, board members, partners, etc., are required to provide accurate and truthful information to ODJFS.

- If an owner/administrator or other administrative personnel is aware that a staff member has presented the department with false information, they should immediately make ODJFS aware of the falsified information.

5101:2-12-18: Transportation and Field Trip Safety

☐ The driver(s) for all trips must meet the following:
  - Must be 18 years old.
  - Must have a valid driver’s license.
  - Shall not be under the influence of any substance which impairs their driving ability.
Helpful Hints

- The center should obtain a copy of the staff member’s driver’s license, prior to the individual transporting children. It is also a good practice to obtain a copy of the individual’s driving record, both when they begin driving for the center, and periodically after that.
- All drivers should be instructed that they must notify the center if there is any change in their driving status.
- All drivers should be instructed to notify the center if they are taking any medication that recommends they not operate heavy machinery (vehicles) while they are taking the medication. This could be either prescription or non-prescription medication.

5101:2-12-22: Child Guidance and Management

- The rule describes guidance and management techniques which are prohibited from being used by any staff or employees. The following prohibited techniques represent the serious risk non-compliances:
  - Abuse, neglect, or endangerment.
  - Cruel, harsh, or extreme techniques.
  - Any form of corporal punishment.
  - The use of physical restraints.
  - Restraining children by any means, other than holding the child, for a short period of time, in order to help them regain control.
  - Placing children in a locked room or confined space.
  - Withholding all food during required meal and snack times.
  - Subjecting children to verbal abuse.
  - Confining children to equipment such as cribs or highchairs as a means of punishment.
  - Isolating or restricting children from all activities for an extended period of time.

Helpful Hints

- It is imperative that centers provide training to staff about appropriate behavior management techniques to be used with young children. The training should also include age appropriate behaviors and expectations. It is also essential that centers have an identified process for staff to use, when they need to have a break from the classroom, in order to regain control during stressful periods. The plan should include how a staff member would request and receive help, in order to assure proper supervision and staff to child ratios are maintained.
- It is especially important that staff members who are working with infants understand the developmental behaviors and expectations of this age group. Separation and other similar forms of discipline should not be used with this age group.

5101:2-12-26: Statement of Non-conviction and Criminal Records Checks

- A signed JFS 01329 Statement of Nonconviction, including verification that a fingerprint check has been requested, must be on file for all employees before they begin employment.

Helpful Hints

- When interviewing prospective candidates for employment, as part of the application packet, have required paperwork ready for review. Explain that completing this information is one of the conditions for hire. Upon making an offer to an individual, give them all of the required paperwork. Keep a checklist, which includes required deadlines, in order to know at a glance what is still required to be completed before the individual can begin employment.
- A sample form (JFS 01219 Child Care Staff Member and Employee Requirements) is available as a quick reference on the required paperwork which must be on file for all staff members/employees/volunteers.
All employees must provide the center with proof of five years of Ohio residency. If an employee has not been a resident of Ohio for five years, an FBI check must be completed on the individual, in addition to the BCII check.

- The sample form JFS 01245 Verification of Five Years of Ohio Residency is available to document proof of Ohio residency.

Criminal records checks must be requested for all staff prior to employment.

- If a staff member was previously employed at the center, and has been re-hired, a new criminal records check must be requested prior to rehire.
- If a staff member works for another employer, and has had a criminal record check completed through that employer, another criminal records check must be requested by the center, prior to employment.
- All individuals who are responsible for children and/or are used to meet staff/child ratios for any period of time at all, must have a criminal record check completed. (If office personnel, custodial help, cooks, bus drivers, etc. are ever responsible for children, and/or used to maintain ratio, even for a short period of time, they must have a criminal records check completed.)
- Criminal records checks must be on file for all employees hired on or after October 29, 1993.
- The criminal record check results will be accepted if they are dated within 30 days of the employee’s first day of employment. The results may be dated 30 days prior to employment, and must be returned to the center within 30 days of the date they were requested.

If a center has requested a criminal records check be completed, and the fingerprints were unable to be processed, the center must resubmit the request. The center must do this within one business day of notification that there was a difficulty in processing the request, and should document on the JFS 01329 Statement of Nonconviction the date on which they were resubmitted, along with the administrator’s signature.

- If a center is located within 75 miles of a WebCheck site, a WebCheck must be conducted. If a center is not located within 75 miles of a WebCheck site, the rolled fingerprint cards and criminal records check request should be submitted directly to BCII. All FBI checks must be completed by submitting the rolled fingerprint cards and requests.

**Helpful Hints**

- A list of WebCheck locations, by county, is available at [www.webcheck.ag.state.oh.us/webcheckcommunity.htm](http://www.webcheck.ag.state.oh.us/webcheckcommunity.htm).
- If the center is uncertain as to what steps need to be taken in the event there was a difficulty in processing the check, contact BCII at (740) 845-2000 for further instructions.

If a requested criminal records check is not returned within 30 days, the center must contact either the WebCheck facility or BCII to determine if there was a problem in obtaining the results. This contact should be documented on the employee’s JFS 01329 Statement of Nonconviction.

Any employee who has a prohibited conviction must be immediately released from employment. If the center chooses to employ the individual under the rehabilitation standards, the employee cannot return to work until all written documentation is in place to verify the individual has met the rehabilitation standards.

If a student worker is used in ratio at the center, they must have a criminal record check completed. The school or college which they attend may request the criminal records check, but a copy must be on file at the center. If the student worker is hired for additional hours as an employee of the center, the center must then request a criminal records check on the individual.

Any individual who has responsibility for children, but is not an employee of the center must have a criminal record check completed. This would include individuals such as dance or computer instructors,
tutors, or individuals providing special services. The agency which employs the individual may request the criminal records check, but a copy must be on file at the center.

5101:2-12-20: Supervision/Staff/Child Ratios and Grouping

☐ No employee or child care staff member shall be under the influence of any substance that impairs their ability to supervise children or perform their job duties.

Children Shall be Protected from Abuse and Neglect

5101:2-12-21: Care and Nurturing of Children

☐ All child care staff are required to report suspicions of abuse or neglect to their local public children’s services agency.

- It is imperative that the abuse/neglect reporting requirement is discussed with staff before they begin to work with children. Key points to highlight with staff include:
  - The reporting requirement is based on suspicion of abuse or neglect. It is not the responsibility of the staff member to investigate or make a final determination before reporting. The responsibility for investigation and determination is with the trained children’s services employee.
  - It is the employee’s responsibility to report to the local children’s services agency. The reporting requirement is not fulfilled by telling the owner/administrator or another child care staff member.

Helpful Hints

- It is recommended that all staff attend the child abuse and neglect in-service training. Although the rule does not require this, it is best practice to have as many staff members as possible attend the training. If a staff member has not been through the in-service training, they should be aware of which staff members have attended, in the event they have questions.

- If a referral needs to be made, some points to remember:
  - This may be the first time an employee has ever had contact with children services. It is often helpful to have another person with the employee to offer support when making the referral.
  - Always document the date and time of call and with whom you spoke when making a referral.
  - Have the child’s file with you when you make the referral. The intake worker will request information about the child/family.

- It is recommended that if an employee has allegedly abused, neglected or endangered a child, the employee be placed on administrative leave until an investigation has been completed.

☐ All center employees are required to protect children and remove them from any people or situations which are unsafe.

- Staff should follow established emergency procedures. The center should develop a plan for such situations, staff should be trained and plans should be implemented when necessary. These types of situations may include: moving into lock-down, evacuating the building, protecting children from violent or aggressive persons.
- Staff members should not allow or encourage children to participate in something unsafe, which could result in a child sustaining a severe injury. Some examples may include: allowing children to move large, cafeteria style folding tables; allowing children to use cleaning agents (anything other than soap and water).
Children Shall Have Health and Medication Needs Met Safely

5101:2-12-31: Administration of Medication

☐ In order to administer any medication, the prescribed form JFS 01217 Request for Administration of Medication, must be completed by the parent/guardian.

- This includes all prescription and over-the-counter medications, and topical ointments, creams, lotions, etc.
- If a school age child is carrying an emergency medication (inhaler, epipen, etc.) the JFS 01217 Request for Administration of Medication must be completed.
- No matter what type of medication is being administered, the parent/guardian must always complete Box 1 on the JFS 01217 prescribed form.
- Refer to JFS 01217 Guidelines for Administration of Medication for information regarding requirements when administering medication.

☐ All medication must be inaccessible to children.

Helpful Hints

- During parent/guardian orientation, discuss with parents/guardians the need to give all medication to staff. Remind parents that any medication which is stored in children’s diaper bags should be given to staff, even if the child is not receiving the medication while at the center. Diaper bags are often stored on hooks or in cubbies, which may be accessible to children.
- Train staff about the need to leave personal medications in places where children would not have access to them. Staff might inadvertently keep medication in their purses or other personal belongings, and leave them in a place accessible to children.
- Have a designated place (preferably a locked area) where all medication is stored. Make sure staff are not storing medications in drawers or on low shelves within a cupboard, which would be accessible to children.
- Medication which is required to be stored in a refrigerator should be placed in a locked container, if the refrigerator is accessible to children.

☐ All prescription medication must have either the prescription label attached or written instructions from a physician, advance practice nurse, or dentist which must be on the JFS 01217 prescribed form.

- If a child is using a sample medication, which does not contain a prescription label, have the physician, advance practice nurse or dentist complete Box 2 on the prescribed form, before the center administers the medication.
- The original prescription label must be attached to the medication, a photo copy of the label will not be accepted as meeting the rule requirement.

☐ All prescription labels must contain the following information:

- Child’s full name (first and last).
- A date within the last 12 months (check to make sure medication is not expired).
- The exact dosage to be given.
- Means of administration (topical, oral, eye drops, etc.).

☐ The center must assure that the dosage they are administering to a child does not exceed either the prescribed dosage or the dosage recommended by the manufacturer.
• Even if a parent gives written permission to administer a larger dosage, the center must obtain written permission from a physician, advance practice nurse, or dentist in order to administer a larger dosage (Box 2, JFS 01217 prescribed form).

• Some labels for over-the-counter medications state that a physician must be consulted for the safe and correct dosage for the age of the child to whom the medication is going to be administered. If this is the case, written instructions from a physician, advance practice nurse, or dentist must be obtained (Box 2, JFS 01217 prescribed form).

• Make sure that the child's age and weight are documented on the JFS 01217 prescribed form (Box 1). Many dosage amounts are determined by the age/weight of the child.

**Helpful Hints**

- It is essential that prior to administration, it is verified that the information on the medication container is the same as the information completed on the JFS 01217 prescribed form. It is easy to mistake “tsp” for “tbs” or “1/3” for “2/3”.

- During parent orientation, it is important to review this requirement with parent/guardians. Suggest that they always request written instructions for dosage during a doctor's visit, in which they are advised to administer this type of over-the-counter medication.

☐ Medication may not be administered for a period longer than permitted.

• Medication may not be administered for longer than prescribed by a physician, advance practice nurse, or dentist.

• Medication may not be administered for longer than requested by the parent/guardian on the JFS 01217 Request for the Administration of Medication form.

• Topical ointment used to treat a skin eruption or irritation may not be administered for longer than 14 consecutive days without written permission from physician, advance practice nurse, or dentist.

• The rule requires that over the counter medication should not be administered for longer than three consecutive days in a fourteen day period. It is a serious risk non-compliance if this type of medication is administered for longer than the period recommended on the manufacturer’s instructions or guidelines, unless doctor’s permission is secured on the prescribed JFS 01217 prescribed form.

☐ The center must follow the parent/guardian written instructions on the prescribed form.

• These instructions may not exceed prescribed or manufacturer’s recommended dosages, and may not exceed the maximum length of time for which a medication may be administered.

☐ Medication must always be in its original container.

**Helpful Hints**

- If an ongoing medication needs to be kept both at home, and at the program site, the original container of the medication must be kept at the program. Some pharmacies will split the medication between two containers for this purpose, if requested by the parent/guardian.

- The original container assures that there is not a mix up between two different medications which may look similar. It also assures that only medication which is prescribed for a child is given to the child.

☐ If fever/pain reducing medications which contain aspirin, or cough/cold medications which contain codeine are to be administered at the center, written instructions from a licensed physician must be obtained (Box 2, JFS 01217 Prescribed Form).

☐ The prescribed JFS 01217 Request for the Administration of Medication form must be completed correctly when administering medication to a child.
Helpful Hints

Some common issues when completing Box 1 of the form:

- When completing the time when the medication is to be administered, an exact time(s) must be noted. Do not use “as needed” or “every four hours”. Instead use “8:00 and 12:00”. If the time changes on a daily basis, document the day and time to be administered, with parent/guardian initials. Attach this documentation to the JFS 01217.
- When completing the period of time the medication is to be administered, put a specific number of days. Do not put “for as long as needed”. People may have differing opinions as to how ill a child is, and whether or not they still need medication.
- Make sure that the child’s date of birth and weight are completed. This information is sometimes needed in order to determine the correct dosage to be administered.
- If a medication is for a health condition, and is only to be administered in an emergency (epipen, inhaler), the form should describe the symptoms that would occur which would necessitate the medication being administered, and then the time period for which it should be administered. An example may be: Time to Administer – when asthma like symptoms occur such as difficulty breathing or wheezing, and Time Period – 1 time at time of attack. Additionally, a referral should be made to the JFS 01236 Child Medical/Physical Care Plan for further explanation as to the child’s condition and procedures to be followed.
- Make sure that the parent/guardian signature is always obtained prior to administering medication.
- There is a difference between an infant formula and a children’s formula for many medications. The dosage amount will be different based on the formula being administered. Be sure the medication that is being administered is the correct formula.

Some common issues when completing Box 3 of the JFS 01217 prescribed form:

- It is very important that each time staff administer medication, they complete the date, time, amount, and signature areas.
- If possible, it is recommended that two people be present each time medication is administered. The designated staff member actually administers the medication and the second staff member verifies that all required information is completed, that the correct dosage has been administered, and that the designated staff member has completed the necessary documentation.

- It is highly recommended that staff attend the Administration of Medication Training. This training is offered free of charge by the Child Care Health consultants. A complete listing of contact information, by county, for the Child Care Health consultants is available at: http://www.occrra.org/hcco_consult.htm.

5101:2-12-38: Care of Children with Health Conditions

☐ All children who have health conditions which may require that medical procedures be performed at the center must have detailed written information completed and on file. The sample JFS 01236 Child Medical/Physical Care Plan may be used to secure this information.

- This includes any children who have health conditions, such as asthma, allergies, diabetes, cystic fibrosis, etc. If the condition would require knowledge on procedures to be performed, or actions to be taken, even if it’s to contact 911 and make the child comfortable, there needs to be a completed form on file.
- If a school age child carries an inhaler or epipen, a health care plan is required to be completed.
Helpful Hints

- When the child’s health and enrollment form is completed upon enrollment, it is important to check the health information section on the back of the form. Parents/guardians should indicate in this space if a child has a health condition. If it is indicated that the child has a health condition, then a care plan must be completed. If the parent indicates there are no special procedures to be followed, have them note this on the health and enrollment form.
- If a parent/guardian indicates that the child has a health condition on the health and enrollment form, and the center is unsure as to whether the required plan is to be on file, the center should either have one completed or contact their licensing specialist for clarification.
- It is highly recommended that the JFS 01236 Child Medical/Physical Care Plan be completed to document the required information. Although this is a sample form, it has all of the required information, which will assure no information is mistakenly left off the form.

Whenever a child with a medical condition which requires medical procedures be performed, is present at the center, a trained staff member must be on the premises.

- The trained staff members must be trained by the parent/guardian or by a certified professional in the procedures necessary to be performed.

- If the child is transported by the center, or participates in field trips, a staff member, who is present with the child during these activities, must be trained. It is also required that any necessary medical supplies accompany the child during transportation and field trips.

Helpful Hints

- It is recommended that multiple staff members be trained in the necessary procedures, in the event the trained staff member is absent. It is also important to remember that this includes all hours the child is present. It may be necessary to have opening and closing staff, who are not normally with the child during the day, be trained as well.

The medical care plan must be signed by the parent/guardian and the child care staff member(s) trained to perform any necessary medical procedures. The parent/guardian signature also indicates permission to perform any medical procedures. The sample JFS 01236 Child Medical/Physical Care Plan can be used to document these signatures.

Specific information is required to be included in the medical care plan. The serious risk non-compliances would be if any of the following information is missing:

- The name of the child.
- The identification of and instructions for any necessary medical procedure to be performed.
- The names of the staff members trained to perform the medical procedures by the parent/guardian or certified professional. It must be the parent/guardian or certified professional who trains staff members. One staff member cannot train another staff member.
- The parent/guardian permission to perform any medical procedures.

5101:2-12-42: Cribs

- Infants must be placed on their backs to sleep.

- The only time a child can be placed on anything other than their back to sleep is if they have a JFS 01235 Sleep Position Waiver on file. This form must be signed by a licensed physician.
Helpful Hints
- It is important to train staff on the risks associated with SIDS. This is especially true with new, part-time and substitute staff members who may be unfamiliar with the requirements. Approximately 1/3 of SIDS-related deaths in child care occur in the first week of attendance, ½ of these on the first day (both family child care and child care centers). The research indicates the reason for this is unaccustomed tummy sleeping with children who sleep on their backs at home, and are placed on their stomachs in child care.
- Post signs in the crib space and on doorways into crib rooms reminding staff and parents to only place children on their backs to sleep.
- Obtain educational resources to distribute to parents about the risk of SIDS for children who sleep in a position other than on their backs.

- Children should never be placed in a car seat or bouncy seat to sleep in their cribs. If a child arrives at the program asleep in their car seat, they must be removed and placed on their back to sleep in the crib.

- It is highly recommended that staff attend the Reducing the Risk of SIDS in Child Care Training. This training is offered free of charge by the Child Care Health consultants. A complete listing of contact information, by county, for the Child Care Health consultants is available at: http://www.occrra.org/hcco_consult.htm.

Environmental Hazards

Children Shall be Cared for in Facilities Appropriately Maintained and Inspected

5101:2-12-07: Inspection and Investigation Rights
- The center must provide access to:
  - ODJFS staff for purposes of either announced or unannounced inspections
  - Pertinent records
  - Other information or documentation which is necessary to determine compliance
  - If the administrator is not at the center, the designated staff person in charge must be aware of this rule requirement. They must allow access to the center for the purposes of any type of inspection by the department. Additionally, they should have access to all records and other documentation. This includes all children and staff files and other documentation required to be on file.

Helpful Hints
- If the files are kept locked in the absence of the administrator, someone at the center must be able to access them in the event of an emergency.

5101:2-12-10: Building Approval
- All space used to care for children must be approved by the building department and documented on a certificate of use and occupancy, prior to its use. (See exception below regarding school buildings used only for school age children.)
  - This includes not only classroom space, but large muscle space, gymnasiums, cafeterias, music rooms, etc.
Helpful Hints

- Upon initial licensure, it is a good idea to have any space approved that may potentially be used for child care. Even if a program is not anticipating using the space immediately, it is more timely and cost effective to have the space looked at when the building inspector is onsite doing an initial inspection.
- It is important to assure that the certificate of use and occupancy allows for use of a space before using it. This is especially true in buildings that are used for multiple purposes. For example, a space that may be permitted to be used for children during church school may not be permitted to be used for children in a child care facility.
- If there is ever a question about whether a room or space has been approved, it is recommended that the center contact their licensing specialist for clarification prior to use.

Programs which care exclusively for school age children which are located in a school building are not required to have a certificate of use and occupancy, unless there are building code violations.

- If the program takes care of any age children, other than school age, they will be required to obtain a certificate of use and occupancy.
- If the department becomes aware of any building code violations in the school building, the program will be required to obtain a certificate of use and occupancy.

If a program remodels or modifies any space, they are required to obtain a new certificate of use and occupancy, prior to the use of this space.

- If the center is uncertain as to whether the remodeled or modified space would require a new certificate of use and occupancy, the building department with jurisdiction should be contacted. If the building department indicates that a new certificate is not needed, the center should try to obtain written documentation from the building official indicating this. If the building official is unwilling to provide written documentation, the center should document the date and time of the contact. They should also document the explanation of the remodel/modification which was given to the building official, the building official’s response, and efforts which were made to obtain written documentation that a new certificate was not required. This documentation should be forwarded to the licensing specialist to remain on file with the department.

Building and room occupancy limitations as stipulated by the building department must be maintained.

Children who are less than 2 ½ years of age can only be cared for in space which has been approved by the building department for this age group.

Helpful Hints

- Prior to using any rooms for the care of children who are younger than 2 ½ years of age, always check with your licensing specialist. Only certain spaces can be used for this age group due to requirements which must be met, if the center must be evacuated. This applies to all spaces used, including large muscle rooms, cafeterias, gyms, etc.

5101:2-12-11: Fire Department Approval

All space used to care for children must be approved by the fire department prior to its use. Each center must have a fire approval upon initial licensure, and annually thereafter.

- This includes not only classroom space, but large muscle space, gymnasiums, cafeterias, music rooms, etc.
- If a center is unable to obtain fire approval, due to violations, the violations should be immediately corrected, and a follow-up inspection completed by the fire inspector.
Helpful Hints

- Upon initial licensure, it is a good idea to have any space that may potentially be used for child care approved. Even if a program is not anticipating using the space immediately, it is more timely and cost effective to have the space looked at when the fire inspector is onsite doing an initial inspection.

- Each year, the center will receive a fire inspection notice from the department. This will come as a separate notice during the first year of the licensing period, and with the renewal packet during the second year of the licensing period. It is strongly recommended that as soon as the notification is received, the center contact the fire department to schedule an appointment. Often, because the notification is received several months in advance, people put off calling to schedule the appointment. They are then unable to schedule an appointment before the expiration date because they waited too long.

- If the center is unable to schedule an appointment before the expiration date, due to the fire inspector’s schedule, the center should document all contact with the fire department. This should include dates when contact was made, and the results (talked with fire inspector, talked with scheduling personnel, left voice mail, faxed written request, etc.). Additionally, if a date for the fire inspection is able to be scheduled, this date should be documented as well.

- If the center is unable to receive approval due to violations, the violations should be corrected immediately and another fire inspection should be scheduled. If the center is unable to schedule a follow-up appointment in a timely manner due to the fire inspector’s schedule, the center should document all contact with the fire department. This should include dates when contact was made, and the results (talked with fire inspector, talked with scheduling personnel, left voice mail, faxed written request, etc.). Additionally, if a date for the follow-up fire inspection is able to be scheduled, this date should be documented as well.

If a program remodels or modifies any space, they are required to obtain a new fire approval, prior to the use of this space.

- If the center is uncertain as to whether the remodeled or modified space would require a new fire approval, the fire department with jurisdiction should be contacted. If the fire department indicates that a new approval is not needed, the center should try to obtain written documentation from the fire inspector indicating this. If the fire inspector is unwilling to provide written documentation, the center should document the date and time of the contact. They should also document the explanation of the remodel/modification which was given to the fire inspector, the fire inspector’s response, and efforts which were made to obtain written documentation that a new approval was not required. This documentation should be forwarded to the licensing specialist to remain on file with the department.

Prior to caring for infants or other non-ambulatory children (younger than 2 ½ years of age or children with special needs who are unable to evacuate on their own) on any floor, other than the first floor of the building, approval must be received by the fire department.

- If the center has received approval from the fire department for the care of infants or non-ambulatory children to care for children on a floor of the building, other than the first floor, this must be documented on the JFS 01303 Fire Inspection Report. It is recommend that you review the form prior to the inspector completing the inspection to assure this information has been properly documented.

5101:2-12-12: Food Service Licensure

- All programs must have either a food service license, or a JFS 01240 Food Service License Exemption Report on file. This license or exemption will be issued by the local board of health.
If the center has a food service license, this must be renewed on an annual basis.

- In order to renew a food service license, the program must submit the required application and/or fee to the local board of health.

**Helpful Hints**

- As soon as the program receives renewal notification from the health department, it is suggested that the application and any required fees/paperwork be submitted immediately. This way, the center can assure they don’t forget to submit the application before the deadline. The center should document when they submitted the application and any required fees/paperwork. This documentation could be a purchase order number, a check number, a documented phone call to the health department, etc.

If a center has a JFS 01240 Food Service License Exemption Report, they cannot serve and/or prepare food in violation of this exemption.

- Upon obtaining the food service license exemption, the center should verify with the local health department any restrictions on preparing/serving food. If the center wants to serve snack, have the children participate in cooking activities, allow parents to provide snacks/food, etc., the health department should be consulted prior to these activities to assure these activities would not be in violation of the center’s exemption status. Additionally, if parents/guardians supply meals, but the center supplies cups, silverware, etc., the center should check with the health department regarding requirements about washing these items.

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**Children Shall be Provided With Safely Maintained Space**

**5101:2-12-14: Outdoor Play**

The following information applies to both on-site playgrounds, and any off-site playground or park that the program uses to meet their daily Rule 14 requirements.

- The space used for outdoor play must be well defined by a fence that is safe and in good repair or other barrier, and must be protected from hazards.

  - The center must have a fence or other natural barrier approved by the department, prior to using the outside play space.
  - The fence and gate must be in good working order, which would prevent a child from leaving the outdoor play area.

**Helpful Hints**

- The gate on the playground must have some type of latch or locking mechanism which would prevent children from leaving the outside play area. Latches which are only able to be opened from the outside, by an adult reaching over the gate, are available. Some programs use a bungie cord with “S” hooks to secure the gate closed.
- It is recommended that prior to installation of any latch or locking mechanism, the center verify with the fire inspector that a particular type of latch or locking mechanism is permitted to be used.

- If the center has been approved to use temporary fencing or barriers for the purposes of special activities (bike day in the parking lot behind the program marked off with cones, water play in the grassy area not normally used for outdoor play marked off with sawhorses) this temporary fencing must be in place during the activity. It is important to verify with the licensing specialist that this would be approved, prior to engaging in the activity.
If fencing becomes broken and a child would be able to leave the playground area, the fencing should be immediately repaired or replaced or alternative arrangements should be made to assure children cannot leave the playground. This could include securing boards over the broken fencing area, or placing a staff member at the broken spot to assure children do not leave the area.

The outdoor play area should be free of hazardous debris. This would include items such as needles, broken glass, or any items contaminated with bodily fluids.

It is important that staff check the outdoor play space before use by children each day. This is especially true if the program is located in an area where others may use the play space during hours when the center is not in operation.

Climbing equipment should not be placed too close to walls, fences, barriers, etc., which would present a hazard if a child were to fall off of the equipment.

- The rule requiring six feet of space on all sides of climbing equipment, and nine feet of space between pieces of climbing equipment does not become effective until 1/1/2010. However, centers are still required to provide enough fall zone space, so that if children fall off of equipment they would not fall into something which could be hazardous to them.

Swings and climbing equipment should not be placed directly over grass, concrete, asphalt, blacktop, dirt, rocks, or other hard surfaces.

- None of the prohibited hard surfaces should be exposed under and around swings and climbing surfaces. There should be sufficient depth of the protective covering so that in the course of normal use by children, the protective covering is not kicked or moved aside.
- The child care licensing rules, effective 1/1/07, include an appendix outlining the required depths of resilient surfacing material (mulch, pea gravel, wood chips, sand, shredded tires). Although centers are not required to have the required depth in place until 2010, it is strongly recommended that programs begin to review and implement the changes as soon as possible.

Research shows that 79% of all playground injuries occur as a result of falls. Of these, 68% are a result of children falling off of the equipment and onto the surface below. The use of the appropriate amount of protective covering will help to lessen the impact of the falls, thereby resulting in fewer or less severe injuries.

Staff should be assessing the amount of protective covering on the playground. If additional materials need to be added, they should inform the administrator. As the protective covering becomes compacted, the material should be turned over and raked up monthly. Many programs have periodic playground clean-up days when they ask parents or volunteers to help with this, as well as other playground maintenance tasks.

Staff should also be assessing whether or not protective covering materials have been moved to areas of the playground where they are not needed. Through the course of normal use, mulch and other materials often get kicked into areas of the playground which would not require protective covering. Staff should use a rake or shovel to move the materials back into the fall zone areas.

Indoor climbing equipment which is more than three feet high must have landing mats under and around them, to protect children in the event of a fall. These mats must be at least one and one-half inches thick.
• The mats must be placed so that any area under the climbing equipment, onto which a child could fall would be covered.
• The mat must be one and one-half inches thick. Two smaller mats placed on top of each other, which together are one and one-half inches thick, do not meet the requirement of this rule.
• The mats must be placed and used according to manufacturer's guidelines.

☐ Space heaters shall not be used anywhere in the child care facility without written approval from the fire department. Approval should be obtained on the JFS 01303 Fire Inspection Report.

• Space heaters shall not be used in classrooms, hallways, entranceways, kitchens, storage areas, office areas, large muscle rooms, etc. The danger in using space heaters is not only the risk of a child coming into contact with it and sustaining a burn, but there is also the danger of a malfunction occurring with the equipment, resulting in a fire.

5101:2-12-17: Swimming and Water Safety

☐ Only school age children are permitted to participate in swimming activities in lakes, rivers, ponds, creeks, etc.

• A child is considered a school age child only if he/she is eligible to attend a grade of kindergarten or above. In the summer preceding a child being eligible to attend kindergarten, the child is still considered a preschool child, even if he/she has turned five, until the school year begins.
• Written parental permission must be obtained prior to children participating in water activities. The sample form, JFS 01227 Permission to Participate in Swimming Activities, can be used for this purpose.

5101:2-12-18: Transportation and Field Trip Safety

☐ No more than one child is permitted to be strapped into each seat belt.

• Before staff leave for a trip, they should do a visual inspection of the children to ensure that all children are seat-belted properly. This is especially true of children who are seat-beltling themselves into the vehicle, and may not get a latch secured tightly or who may place the clasp into the wrong latch.

☐ Children may not stand or sit on the floor of a vehicle, while the vehicle is in motion.

Helpful Hints

• Review with children the importance of following safety rules prior to leaving for a trip. This is especially true for those programs that don’t take field trips often. Children are excited about the trip, and often forget rules, even if they are familiar with them.

☐ All children must be seated and use a car seat, according to Ohio law.

• The rules effective 1/1/07 include an appendix to this rule. The appendix includes both Ohio’s law and other recommendations regarding the use of child safety seats.

☐ Children under 12 may not be seated in the front seat of the vehicle.

Helpful Hints:

• Research shows that children in the front seat are 40% more likely to be injured in an accident, compared to rear-seated children.
Seats must be securely anchored to the floor of the vehicle.

Children must enter and exit the vehicle from the curb. This is especially true in high traffic areas, such as school loading and unloading zones and in parking lots.

- Children should not have to walk through or across lines of traffic in order to exit or enter the vehicle.

5101:2-12-42: Cribs

Nothing should be put in the crib, or hung over the side of the crib which would restrict the staff member’s visibility of a child who is in the crib.

- The following are prohibited from being placed in cribs which are occupied by a child:
  - Pillows
  - Bumper Pads
  - Clothing, which is being stored in the crib
  - Diaper bags
  - Car seats
  - Large, fluffy stuffed animals
  - Soft bedding, such as quilts, comforters, fluffy blankets, sheepskins
  - Any objects strung across the length or width of the crib, if the child has the gross motor ability to pull themselves up on their knees to reach the object
- Children should not be placed in cribs with anything around their necks. This would include:
  - Bibs
  - Pacifiers on ribbons or strings (children may fall asleep with a pacifier on a ribbon clipped to their clothing, but the ribbon should be removed prior to placing them in their cribs in order to prevent the risk of strangulation).
- Nothing should be placed over the side of the crib, which would prohibit the staff member from seeing the child who is in the crib. This would include blankets or large items of clothing.

Helpful Hints

- Many parents will provide pillows, stuffed animals, bumper pads, quilts, fluffy blankets, etc., to be used in their child’s crib while at the program. Even though these items are often used in homes, they are not allowed to be used while the child is in child care. Part of the orientation for infant parents/guardians should be an explanation of why these types of items cannot be used while the child is at the program.
- It is recommended that the only blankets that be used while the child is at the program, are lightweight receiving blankets. The risk of SIDS increases when children become overheated while sleeping.
- Prior to placing a child in a crib to sleep, all hazardous items should be removed. Often during morning drop off a parent/guardian may place items such as diaper bags, extra sets of clothing, or car seats, in the crib for storage.
- Remind staff that children should not be placed in their cribs with bibs or pacifiers placed around their necks. Post a sign at the entranceway to the crib area or above individual cribs as a reminder to staff and parents/guardians.
- If there is ever a question as to whether or not an item would be allowed to be placed in or over the side of the crib, it is always better to error on the side of caution and not use the item. It is recommended that a licensing specialist be contacted prior to the use of any items that are in question.
Children Shall Not be Exposed to or Have Access to Unsafe Equipment/Materials

5101:2-12-14: Outdoor Play

The following information applies to both on-site playgrounds, and any off-site playground or park that the program uses to meet their daily Rule 14 requirements.

☐ All swings, slides, and climbing equipment shall be stable and securely anchored.
  • When equipment is being used by children, it should not shift to the degree that there is the risk of the structure collapsing.
  • When children are using swings, the legs of the equipment should not have enough movement, so that they are pulling up out of the ground.
  • Equipment should be placed in a secure setting and should not wobble or tip when shaken.
  • All playgrounds must be assessed on a quarterly basis using the prescribed JFS 01281 Child Care Playground Inspection Report. Any areas that are assessed as not meeting the rule requirement should be immediately corrected.

Helpful Hints
  ▪ As part of their inspection of the playground, staff should try to shake equipment, including climbing equipment, the legs of swing sets, and the top part of slides where they attach to the platform. If there is give to the equipment so that it is wobbling or there is significant movement, staff should immediately report this to the administrator for repair.

☐ All climbing ropes should be anchored on both ends.
  • Both the top and the bottom ends of the rope must be anchored. Often, the top of the rope is the only end anchored, and the bottom of the rope is left hanging loose.
  • If the rope is able to be made into a loop, the interior perimeter should be less than five inches, in order to prevent the risk of strangulation.

☐ All platforms over 30 inches tall must have a protective barrier in order to prevent the risk of a child falling off of the equipment.

☐ There shall be no openings on the equipment which present a risk of entrapment. Any openings on equipment must be less than 3 ½ inches or more than 9 inches.

Helpful Hints
  ▪ It is important to check all openings of equipment, not just the obvious spots, such as spacing between bars used as protective barriers. The areas between steps, handlebars or handrails, rungs on monkey bars or ladders, openings between platforms and barriers, etc., should also be checked.
  ▪ All licensing specialists have a toolkit which they use to measure for entrapment hazards. If there is ever a question about a piece of equipment, please contact the licensing specialist for review prior to allowing children to use the equipment.
  ▪ When installing new equipment, especially equipment not manufactured for commercial use or homemade equipment, it is essential that the openings be checked to make sure they meet the required spacing, prior to allowing children to use it. Even openings on professionally installed equipment need to be checked to ensure that it has been installed correctly.

☐ All equipment must be maintained in a safe condition and free from sharp points or broken pieces which may cause a child to sustain an injury.
• Equipment should be checked on a regular basis for broken pieces and sharp points. It is especially important to check for any broken pieces which could result in a child falling off of equipment or being entrapped on the equipment. Any broken pieces or sharp points onto which a child could injure themselves should immediately be reported. Children should not be permitted to play on or around the equipment until it is removed or repaired.

• Staff should check for cracks in equipment. Large cracks which are deep enough or wide enough for clothing to become imbedded should be immediately reported and repaired. Large cracks can also jeopardize the integrity of the equipment, causing it to buckle or fold.

□ Any bolts that children may be exposed to during their normal course of play should have no more than two threads exposed on them beyond the nut.

□ All manufacturers’ guidelines must be followed when installing equipment.

• The equipment should only be used by the age group for which it is intended. School age equipment which is used by younger children can result in injuries. Some examples would include: fire poles on equipment, steps or ladders being spaced farther apart, slides of an increased height, monkey bars, etc.

Helpful Hints

□ It is a good idea to keep a copy of all instructions on file for review or further reference, when installing new equipment. It is important to follow these instructions to ensure there is no risk of collapse, entrapment, or instability in the equipment.

□ It is essential that all instructions relating to the structural integrity of the equipment be followed. When installing equipment, it is recommended that someone who is familiar with this type of work either supervise the installation or review the work upon completion.

□ All “S” hooks on equipment should be closed so that the gap is less than .04 inch or the thickness of a dime.

• It is important that “S” hooks on both the bottom and the top of chains on swings are checked regularly. The danger with “S” hooks is both that a piece of children’s clothing could become caught, and that the chain to which the hook is attached could pull out of the hook.

• It is important to note where all “S” hooks on the playground are located. Sometimes they are present in places other than just the swings, where they are typically found.

5101:2-12-15: Safe and Sanitary Equipment and Environment

□ No fire arms or ammunition are permitted on the premises of a child care program.

□ Cleaning agents and chemicals must be inaccessible to children.

• Any product that indicates that it should be stored out of the reach of children, should be placed in a location where children cannot have access to it. Some examples may include: an aerosol can, pesticides, bleach, insect/rodent poisons, gas, and any cleaning products.

Helpful Hints

□ All spaces that children would have access to need to be checked to assure there are no cleaning agents or chemicals accessible to children. This would include unlocked cabinets, cupboards, and closets in rooms. Even though children may be told that they are not allowed to go into a closet or a cupboard, unless it is locked they may still open or access the space.

□ When a program is sharing space with another entity, it is especially important that all parties using the space are aware of this rule. Often a program that is using the space during hours when the center is not in operation has a designated closet or cupboard to
Children must be protected from any hazardous items which threaten their health, safety, and well-being. Some examples may include:

- Children should be kept away from any power tools or live wires during construction or renovation projects.
- In the event of an environmental hazard (gas fumes, black mold, asbestos, lead hazards, toxic fumes, leaking water resulting in structural deterioration, etc.), center staff should take appropriate action to limit the children’s exposure. This may include evacuation, or moving the children to an area away from the hazard. The health department should be contacted for further instructions regarding whether or not children can remain in or return to the center, and for clean-up instructions.
- Matches and/or lighters should not be accessible to children.
- Heavy shelving units should be securely anchored, to prevent them from falling onto a child.
- Children should not move or lift heavy equipment.
- Knives and other sharp objects should be kept out of the reach of children.
- All electrical and extension cords should be secured and inaccessible to children.

**Helpful Hints**

- All electrical cords or extension cords which are attached to heavy objects such as crock pots, radios, televisions, tape players, etc., should be secured so that children do not have access to them. They can be placed behind a shelving unit, or secured to the wall. Many home improvement stores sell products made to secure cords to walls. It is important that a child not be able to pull on an exposed cord, and pull an object down onto themselves.

- All televisions should be securely anchored to their stands. Manufacturers guidelines must be followed for the weight and size of the television on the stand.
- Large, cafeteria style folding tables should not be moved by children. Additionally, children shall not be permitted to play on, under, or around these types of tables. The tables should not be moved when children are near enough that if the table tipped over, it would land on a child. These types of tables are very heavy, and if they fall or tip over, could severely injure a child. They should be stored in such a manner that they would not be able to be tipped onto a child, or should would not have access to play around them or under them.

- Lawn mowers, power tools, and other outdoor equipment should not be used within 100 feet of children.

- Any time children are outdoors, they must be at least 100 feet away from any operating equipment. The only exception to this would be if there is a barrier between the children and the equipment, such as a building or a solid tall fence.
Helpful Hints

- Lawnmowers are dangerous not only because of their spinning blades, but also because debris can be propelled from them. Children could become injured by getting hit by debris such as rocks, branches, or broken glass. Even small rotary lawn mowers can fling objects at speeds of more than 200 miles per hour.
- Young children can move very quickly around this type of equipment and are often attracted to mowers and mowing activities, especially if they have been given rides on a mower before.

☐ Children should not have access to traffic, bodies of water, or wells.

☐ Children should not have access to stoves or hot plates.

Helpful Hints

- If stoves or hot plates are going to be used during a cooking or other activity, it should only be under direct staff supervision. Staff should be close enough to the hot object, so they can immediately intervene if necessary. A staff member should never walk away from a hot stove or hot plate if a child is present, even if it is just to walk across the room to retrieve an item. Children can move very quickly, and are often careless in their excitement of participating in a new activity.

☐ Children should not have access to window pull cords.

5101:2-12-18: Transportation and Field Trip Safety

☐ Any center vehicles, vehicles driven by staff, or vehicles used by contractors to transport children must have an annual safety check completed.

- The inspection must be completed by an ASE certified mechanic or other approved entity.
- The vehicle inspection must be completed every year.
- School buses and multifunction school activity buses which are inspected and licensed by the Ohio state highway patrol, do not need to obtain the annual inspection by an ASE certified mechanic.

Helpful Hints

- It is recommended that an appointment be made 1-2 months in advance of the expiration of the vehicle inspection. This way, if there is difficulty in obtaining an appointment, or the date would need to be changed, there is sufficient time to get it rescheduled.
- Each year when the inspection is completed, mark the expiration date on the next year's calendar as a reminder of when the next inspection needs to be completed.

☐ All required information must be completed on the vehicle inspection form to verify the vehicle is in good repair.

- The prescribed JFS 01230 Vehicle Inspection Report should be used to document all annual vehicle inspections.
- It is especially important that all information regarding the functioning of the vehicle is appropriately documented. This includes information that the lights, brakes, seat belts, windshield wipers, tires, horns, turn signals are working properly and the notation and correction of any safety violation.

☐ Any violations noted on the JFS 01230 Vehicle Inspection Report must be immediately repaired or corrected, prior to continued use of the vehicle to transport children.

- Completion of the repair or correction, should be documented on the JFS 01230 Vehicle Inspection Report, and signed by the ASE certified mechanic who completed the re-inspection.
All cribs must meet the specified dimensions to assure there is not a risk of a child becoming entrapped or suffocated in the crib.

- Full size cribs must be at least 52 inches in length and 28 inches in width. With the mattress in its lowest position and the crib side in its highest position, the vertical distance from the upper surface of the mattress support and the upper surface of the crib side shall not be less than 26 inches.
- Portable size cribs must be at least 36 inches in length and 24 inches in width. With the mattress in its lowest position and the crib side in its highest position, the vertical distance from the upper surface of the mattress support and the upper surface of the crib side shall not be less than 22 inches.
- When children are placed in the crib, all side rails must be in their upright and locked position, no matter what the age or developmental ability of the child.
- Spaces between the bars of the crib and between the bars and end panels of the crib shall not exceed two and three-eighths inches.

**Helpful Hints**

- It is extremely important that all spacing on cribs be measured prior to the use with children. This is especially critical for used cribs which are purchased or donated. Many older cribs were manufactured prior to these size requirements being enforced, and present a risk to children.
- It is recommended that the Consumer Product Safety Commission be consulted prior to the use of any crib, to assure the product has not been recalled or has a safety hazard. A listing of recalled cribs and other children’s items can be found at: http://www.cpsc.gov.

Stacked cribs are prohibited from being used in a child care center.

Mesh cribs, playpens and bassinets may not be used for the purposes of sleeping or napping.

The space between the mattress and the side or end panels of the crib shall not be larger than 1 ½ inches.

- Crib sheets must appropriately fit the mattresses. If a crib sheet is too small it can buckle the mattress or pull off of the mattress, presenting a risk of suffocation to a child. If a crib sheet is too large, the extra material can form a pocket around the face of a child, presenting a risk of suffocation.

Crib mattresses must be firm, so that the mattress does not conform to the shape or contour of the child, in order to reduce the risk of suffocation.
Guide to Referenced Forms

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All revised forms will be available in mid to late January. Some forms that were revised in September have gone through additional revisions. Please continue to check the Bureau’s website for all updated forms. The forms can be accessed at: [http://www.odjfs.state.oh.us/forms/inter.asp](http://www.odjfs.state.oh.us/forms/inter.asp)