



## Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <http://jfs.ohio.gov/CDC/childcare.stm>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details                                      |                                      |                                   |                         |
|--|--------------------------------------|-----------------------------------|-------------------------|
| Program Name<br>Valley Kids                          | Program Number<br>000000102811       | Program Type<br>Child Care Center |                         |
| Address<br>1670 AKRON PENINSULA RD AKRON<br>OH 44313 |                                      | County<br>SUMMIT                  |                         |
| Building Approval Date<br>04/12/1993                 | Use Group/Code<br>E                  | Occupancy Limit<br>86             | Maximum Under 2 ½<br>26 |
| Fire Inspection Approval Date<br>02/23/2021          | Food Service Risk Level<br>Level III |                                   |                         |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual     | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>01/10/2022 | Begin Time 1:00 PM       | End Time 3:30 PM                 |
| Inspection Date<br>01/11/2022 | Begin Time 8:00 AM       | End Time 11:00 AM                |
| Inspection Date<br>01/12/2022 | Begin Time 2:30 PM       | End Time 3:00 PM                 |
| Reviewer:<br>MICHELE FAKAN    |                          |                                  |
| Reviewer:<br>MICHELE FAKAN    |                          |                                  |
| Reviewer:<br>MICHELE FAKAN    |                          |                                  |

| Summary of Findings      |                                      |                       |                        |                    |
|--------------------------|--------------------------------------|-----------------------|------------------------|--------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>13 | No. Serious Risk<br>0 | No. Moderate Risk<br>2 | No. Low Risk<br>17 |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |       |
|   | Totals           | Full Time  | Part Time | Total |
| Infant ( Birth to < 18 m)                                 |                  | 8          | 0         | 8     |
| Young Toddler   |                  | 2          | 0         | 2     |
| <b>Total Under 2 ½ Years</b>                              | 26               | 10         | 0         | 10    |



|                                  |    |    |    |    |
|----------------------------------|----|----|----|----|
| Older Toddler                    |    | 5  | 0  | 5  |
| Preschool                        |    | 8  | 0  | 8  |
| School Age                       |    | 0  | 10 | 10 |
| <b>Total Capacity/Enrollment</b> | 86 | 13 | 10 | 33 |

| Staff-Child Ratios at the Time of Inspection |                          |                |               |
|--|--------------------------|----------------|---------------|
| Group  | Age Group/Range          | Ratio Observed | Comment       |
| Infants                                      | Mixed Age Group          | 3 to 7         |               |
| Toddlers                                     | 18 months to < 30 months | 1 to 5         |               |
| Toddlers                                     | Mixed Age Group          | 1 to 5         | nap           |
| Preschool                                    | Mixed Age Group          | 1 to 4         | nap           |
| Preschool                                    | Mixed Age Group          | 1 to 4         |               |
| Preschool                                    | Mixed Age Group          | 1 to 9         | mixed with SA |
| Schoolage                                    | Mixed Age Group          | 1 to 9         | mixed with PS |

**Summary of Non-Compliances**

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

| Serious Risk Non-Compliances  |
|---|
| <b>No Serious Risk Non-Compliances were observed during this inspection</b> |
|   |
|   |

| Moderate Risk Non-Compliances   |
|---|
| <b>Domain: 04 Indoor/Outdoor Space</b>  |
| <b>Rule:</b> 5101:2-12-11 Outdoor Play Fall Zones   |
| <b>Code:</b> The program is required to provide adequate fall surface for the outdoor play space.   |
| <b>Finding:</b> During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in numbers 2 and 3 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: 02/11/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required.

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

1. Submitting the request for a background check for child care in the OPR.
2. Submitting fingerprints electronically according to the process established by BCI.

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

Corrective Action Plan Due: 02/11/2022

**Low Risk Non-Compliances**

**Domain: 00 License & Approvals**

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to keep their information current in OCLQS.

Finding: During the inspection, it was determined the information in number 4 below was not up to date in the Ohio Child Licensing and Quality System (OCLQS):



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

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

**Domain: 00 License & Approvals**

Rule: 5101:2-12-03 Inspection Requirements

Code: The program is required to respond to noncompliances by the date noted in the inspection report.

Finding: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 6/4/2021. The rule requires the program to complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2022

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in numbers 3, 4, and 5 below:

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



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

Corrective Action Plan Due: 02/11/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Sanitary Equipment and Environment

Code: The program is required to follow the cleaning schedule for equipment.

Finding: During the inspection, it was determined that the items noted in numbers 1 and 3 below were not cleaned weekly, or when soiled, as required:

1. Carpets.
2. Floors.
3. Washable furniture.

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to this rule. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

**Domain: 03 Postings & Equipment**

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: 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 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 required at this time.

Corrective Action Plan Due: 02/11/2022



**Domain: 04 Indoor/Outdoor Space**

**Rule:** 5101:2-12-11 Outdoor Play Fall Zones

**Code:** The program is required to provide fall zones around equipment to prevent injury if a child were to fall.

**Finding:** During the inspection, it was determined that the climber was positioned such that the fall zone requirement in numbers 2, 4, and 6 below was not met:

1. The fall zone was less than 3 feet from the fence for equipment used by children 23 months of age and younger.
2. The fall zone was less than 6 feet from the fence for equipment used by children 24 months of age and older.
3. There was not a fall zone of 3 feet in all directions from the perimeter of the equipment used by children 23 months of age and younger.
4. There was not a fall zone of 6 feet in all directions from the perimeter of the equipment used by children 24 months of age and older.
5. The fall zone was less than 4 1/2 feet from each piece of applicable equipment used by children 23 months of age and younger.
6. The fall zone was less than 9 feet from each piece of applicable equipment used by children 24 months of age and older.
7. Other [ ].

The program is required to provide equipment that is safe with adequate fall zones. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2022

**Domain: 08 Staff Files**

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

**Code:** The program is required to have staff complete the online staff orientation training.

**Finding:** In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 02/11/2022



**Domain: 08 Staff Files**

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

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

Finding: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to have staff complete training in child abuse and neglect recognition and prevention within sixty days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed training in child abuse and neglect recognition and prevention as noted in numbers 1 and 2 below:

1. The training was not completed within sixty days of hire.
2. The training was expired, as it is only valid for two years.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete training in child abuse and neglect recognition and prevention. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.



**Finding:** In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number 9 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of [ ] and [ ] did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
5. CPR – child care staff scheduled during the hours of [ ] and [ ] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of 6:30 am -8:30 am and 5:45 pm until close had expired training
10. Communicable Disease – child care staff scheduled during the hours of [ ] and [ ] had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
13. Child Abuse – child care staff scheduled during the hours of [ ] and [ ] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

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

Corrective Action Plan Due: 02/11/2022

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-08 Medical Statement

**Code:** The program staff medicals are required to be completed within the previous 12 months from the employee's first day of employment.

**Finding:** In review of the staff records, it was determined that medical examination statement(s) on file at the program were not dated within 12 months of the employee's first day of employment, for the employee(s) listed on the Employee Record Chart. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2022





**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: 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 was not on file for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Professional Development Requirements

Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

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

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.



3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
6. Other [ ].

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

Corrective Action Plan Due: 02/11/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

Finding: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number 4.

1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that 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);
4. Tuberculosis (TB) screening/test
  - 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 4a;
  - 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: 02/11/2022



**Domain: 09 Children's Files**

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file at the program for each child enrolled.

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in numbers 1 and 2 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: 02/11/2022

**Domain: 09 Children's Files**

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: 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 numbers 6, 8, 9, 10, 13, 14, and 15 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 required at this time.

Corrective Action Plan Due: 02/11/2022

**Rules In-Compliance/Not Verified**

| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| Rule: 5101:2-12-02 License Posted                 | Compliant | Documenting Statement: The license was in a location visible to parents as required.                           |
| Rule: 5101:2-12-04 Building Department Inspection | Compliant |  |
| Rule: 5101:2-12-04 Fire Inspection                | Compliant | Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must |



|  |           | be secured for the program. Secure a new fire inspection by 2/23/2022.   |
|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Food Service Requirements             | Compliant | Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: KWET-BYPM99 and expires 3/1/2022. |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-07 Administrator Qualifications          | Compliant | Documenting Statement: The administrator has completed the rules review course.  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Written Program Policies and Procedures     | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space Requirements                   | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years    | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Outdoor Space Requirements                  | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Play Equipment                | Compliant | Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards.  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-12 Safe Equipment                              | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-12 Safe Environment                            | Compliant |  |



| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| 5101:2-12-13 Handwashing Requirements                    | Compliant |   |
| 5101:2-12-13 Smoke Free Environment                      | Compliant |   |
| 5101:2-12-14 Transportation and Field Trip Procedures    | Compliant |   |
| 5101:2-12-14 Transportation - Driver Requirements        | Compliant |   |
| Rule: 5101:2-12-14 Transportation - Vehicle Requirements | Compliant | Documenting Statement: An annual safety check of the vehicle(s), using the JFS 01230 "Vehicle Inspection Report For Child Care Centers" form, were verified and dated 2/26/2021 and 6/8/21. |
| Rule: 5101:2-12-15 Medical/Physical Care Plans           | Compliant | Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions.  |
| Rule: 5101:2-12-16 Emergency Drills                      | Compliant | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  |
| Rule: 5101:2-12-16 First Aid/Standard Precautions        | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required.  |
| 5101:2-12-16 Management of Communicable Disease          | Compliant |   |



| Rule                                   | Status    | Documenting Statement(s), If applicable  |
|--|-----------|--|
| 5101:2-12-16 Incident/Injury Reporting | Compliant |  |
| 5101:2-12-16 Written Disaster Plan     | Compliant |  |
| 5101:2-12-17 Daily Schedule            | Compliant |  |
| 5101:2-12-17 Materials and Equipment   | Compliant |  |
| 5101:2-12-17 Daily Outdoor Play        | Compliant |  |
| Rule: 5101:2-12-18 License Capacity    | Compliant | Documenting Statement: The program was operating within their license capacity limits.           |
| 5101:2-12-18 Ratio                     | Compliant |  |
| Rule: 5101:2-12-18 Group Size          | Compliant | Documenting Statement: The group sizes observed on the day of the inspection were in compliance. |
| 5101:2-12-19 Supervision               | Compliant |  |
| 5101:2-12-19 Child Guidance            | Compliant |  |
| Rule: 5101:2-12-20 Cots and Napping    | Compliant | Documenting Statement: Cots were placed appropriately and safely during nap time.                |



| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| 5101:2-12-20 Cribs                               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Meal and Snack Requirements         | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Fluid Milk Requirements             | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Safe Food Handling/Storage          | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-23 Infant Daily Care                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-23 Infant Bottle and Food Preparation  | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-23 Diapering and Toilet Training | Compliant | Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the toddler room(s). |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-25 Medication Administration           | Compliant |   |