



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 A Kid's Place Childcare	Program Number 000000306543	Program Type Child Care Center	
Address 30121 LORAIN RD NORTH OLMSTED OH 44070		County CUYAHOGA	
Building Approval Date 06/25/2004	Use Group/Code	Occupancy Limit 98	Maximum Under 2 ½
Fire Inspection Approval Date 05/09/2023	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Follow-up	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 06/01/2023	Begin Time 8:30 AM	End Time 2:00 PM
Reviewer: Kathryn Noftz		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 16	No. Serious Risk 0	No. Moderate Risk 2	No. Low Risk 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)		7	2	9
Young Toddler		4	2	6
Total Under 2 ½ Years	32	11	4	15
Older Toddler		15	2	17
Preschool		24	0	24
School Age		0	0	0
Total Capacity/Enrollment	84	39	2	56

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



Infant	0 to < 12 months	1 to 4	
Infant	0 to < 12 months	2 to 8	
Infant	0 to < 12 months	1 to 5	Crib room
Toddler 1	18 months to < 30 months	2 to 14	Toddler 1/ 2.5-3 group combined
Toddler 1	18 months to < 30 months	2 to 14	Toddler 1/ 2.5-3 group combined
Pre-K	3 years to < 4 years	1 to 6	
Pre-K	3 years to < 4 years	2 to 13	Pre-K/3 years old group combined
3 year olds	3 years to < 4 years	1 to 8	

Summary of Non-Compliances

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

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program staff is required to remove any items listed in rule that are a potential suffocation risk from cribs.

Finding: During the inspection, it was determined that a child had been placed in a crib with an object that created a potential strangulation or suffocation risk, as indicated in number(s) 4 below:

1. Bib
2. Pacifier clip/ribbon



3. Teething jewelry
4. Blanket for infant under twelve months old
5. Pillow
6. Boppy
7. Bumper pad
8. Clothing stored in the crib
9. Diaper bag
10. Object or toy strung over the crib in which a child can pull himself up
11. Stuffed animal that is large/soft enough to conform to the shape of the child's face
12. Other []

The rule prohibits any item which obstructs child-care staff's visibility or poses a risk of strangulation or suffocation from being placed on or in a crib. Remove the item(s) immediately. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

Domain: 08 Staff Files

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

Code: The program is required to have staff update their background checks every five years as required.

Finding: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number(s) 3 below:

1. Owner
2. Administrator
3. Child care staff member, employee

Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023



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 2/22/23. 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: 07/01/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

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

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 3,5 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: 07/01/2023

Domain: 02 Safe & Sanitary Environment

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

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



Finding: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 4,9 below, were in the restrooms:

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

The restroom(s) must be kept sanitary at all times. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide nonskid rugs and correct any floor hazard that may be unsafe.

Finding: During the inspection, it was determined that the program had a floor surface that was unsafe, in that the carpet was peeling up in the community room. A walking surface that is not hazardous to children must be maintained at the program. 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: 07/01/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals in a place that is inaccessible to children.

Finding: During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in number(s) 2 below:

1. Cosmetics;



2. Disinfecting wipes;
3. Fish food;
4. Hand lotion;
5. Hand sanitizer (for children under 24 months);
6. Laundry detergent;
7. Powder dish washing soap;
8. Paint cans;
9. White out;
10. Potting Soil;
11. Other potentially hazardous substance [].

The potentially hazardous substance was determined to be accessible to children in the following area: Pre-K. Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

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 climbers positioned such that the fall zone requirement in number(s) 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: 07/01/2023



Domain: 05 Health & Safety

Rule: 5101:2-12-22 Fluid Milk Requirements

Code: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

Finding: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number(s) 2 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item number(s) 2 below:

1. Monthly fire drills.



2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 07/01/2023

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to have staff trained in CPR, First Aid, and Communicable Diseases on all trips.

Finding: During the inspection, it was determined that a person trained in cardiopulmonary resuscitation (CPR), first aid and management of communicable disease, had not been present for number(s) 1 below as required by the rule:

1. In the vehicle for routine trips;
2. In the vehicle for field trips;
3. At the destination on all field trips.

Secure current training for the area needed or restructure the staff who are currently trained on the vehicle during routine trips and field trips. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Bottle and Food Preparation

Code: The program staff is required to label bottles containing formula or breast milk.

Finding: During the inspection, it was determined that bottles containing formula for a particular infant were not labeled with the child's name and date of preparation. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.



Domain: 08 Staff Files

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

Code: The program is required to 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(s) 1,4 below:

1. First Aid – child care staff members scheduled during the hours of open and close 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 open and close 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 [] and [] 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: 07/01/2023

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements



Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 4,7 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: []

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

Corrective Action Plan Due: 07/01/2023

Domain: 08 Staff Files

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

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2,3,5,6,7 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.
7. Other- CPR did not include an in-person component.



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

Corrective Action Plan Due: 07/01/2023

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: 07/01/2023

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 number(s) 2,4,10,14 below.

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"



10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other []

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

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 number(s) 1,2,8 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed.
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions
11. Other []

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



Corrective Action Plan Due: 07/01/2023

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-16 Written Disaster Plan

Code: The program is required to have a written disaster plan.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 8,14,15,16,18 below:

Procedures:

1. The written disaster plan had not been completed
2. The plan was not provided to all child care staff and employees
3. The plan was not used to respond to an emergency or disaster situation
4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
5. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
7. Outbreaks, epidemics or other infectious disease emergencies
8. Loss of power, water, or heat ***Loss of power-Not addressed
9. Other threatening situations that may pose a health or safety hazard to the children in the program

Details:

10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
11. Assisting infants and children with special needs and/or health conditions
12. Emergency contact information for parents and the program
13. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
14. Procedures for communicating with parents during loss of communications, no phone or internet service available
15. The location of supplies AND procedures for gathering necessary supplies for staff and children if required to shelter in place
16. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
17. Making the plan available to all child care staff members and employees
18. Training of staff or reassignment of staff duties as appropriate
19. Updating the plan on a yearly basis
20. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program's corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023



Rules In-Compliance/Not Verified

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

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

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

Rule	Status	Documenting Statement(s), If applicable
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 5-9-24.
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Although the program had documentation of a current fire inspection without any uncorrected violations at the time of the licensing inspection, the program did not have the fire inspection completed within 12 months from the date of the last fire inspection without any uncorrected violations. Please ensure that fire inspections are completed in accordance with the rule requirements.

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: RKIG-CPNMBR, 3-1-24.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	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
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation - Driver Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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, was verified and dated 4891(4-13-23) and 5629(8-23-22)
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care Plans	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet Training	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	