

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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 Deta        | ails            |            |                   |
|---|---------------------|-----------------|------------|-------------------|
| Program Name                                      | Program Number      |                 | Pro        | gram Type         |
| CDC Maybury Head Start                            | 000000408199        |                 | Chil       | d Care Center     |
| Address<br>2633 Maybury Road Columbus<br>OH 43232 |                     |                 | Cou<br>FRA | inty<br>NKLIN     |
|   |                     |                 |            |                   |
| Building Approval Date                            | Use Group/Code      | Occupancy Limit |            | Maximum Under 2 ½ |
| Fire Inspection Approval Date 04/01/2021          | Food Service Risk L | evel            |            |                   |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection So                  | соре             | Inspection Notice |              |
| Annual                     | Full                           |                  | Unannounced       |              |
| Inspection Date 12/13/2021 | Begin Time S                   | 9:25 AM          | End Time 3:30 PM  |              |
| Inspection Date 12/14/2021 | Begin Time S                   | 9:50 AM          | End Time 4:10 PM  |              |
| Reviewer:<br>TONYA COZART  |                                |                  |                   |              |
| Reviewer:                  |                                |                  |                   |              |
| TONYA COZART               |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 10                             | 0                | 0                 | 13           |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |       |
|   | Totals           | Full Time  | Part Time | Total |
| Infant ( Birth to < 18 m)                                 |                  | 0          | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0     |
| Total Under 2 ½ Years                                     | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 40         | 0         | 40    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 40               | 40         | 0         | 40    |



| Staff-Child Ratios at the Time of Inspection |                          |                |            |
|--|--------------------------|----------------|------------|
| Group  | Age Group/Range          | Ratio Observed | Comment    |
| Preschool room 101                           | 3 years to < 4 years     | 1 to 15        | classroom- |
|  |                          |                | naptime    |
| Preschool room 101                           | 3 years to < 4 years     | 2 to 16        | classroom  |
| Preschool room 102                           | 3 years to < 4 years     | 2 to 19        | classroom  |
| Preschool room 102                           | School-Age to < 11 years | 1 to 19        | classroom- |
|  |                          |                | naptime    |

#### **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

No Serious Risk Non-Compliances were observed during this inspection

#### Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection



## Low Risk Non-Compliances

#### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

<u>Finding</u>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number 3 below:

- 1. Open pull cords that are not closed loop.
- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- (classrooms 101 and 102)
- 4. Stacked chairs.
- 5. Employee(s) purse(s).
- 6. Diaper bags.
- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [ ].

12. Other [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/16/2022

## Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

<u>Code</u>: The program is required to have an outdoor play space free from immediate risk.

<u>Finding</u>: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a fence in good repair, or other barrier. Although the fence or natural barrier was not meeting the rule requirements, it was determined to not present an immediate risk for a child to be able to leave the playground. The fence or gate was not in good repair and/or being used inappropriately as noted in number 5 below:



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1. The fencing had missing slat boards.

- 2. The fencing was broken.
- 3. The fencing was loose.
- 4. The fencing was rotting.
- 5. The gate was broken and did not close. (appeared mis-aligned)
- 6. The gate was locked.
- 7. The latch on the gate was broken.
- 8. The latch was easily opened by children on the playground.
- 9. The gate had no latch.

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

Corrective Action Plan Due: 01/16/2022

## Domain: 05 Health & Safety

Rule: 5101:2-12-16 First Aid/Standard Precautions

<u>Code</u>: The program is required to have a first aid kit onsite.

<u>Finding</u>: During the inspection, it was determined first aid kits at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in numbers 6 and 15 below:

- 1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
- 2. One roll of hypoallergenic first-aid tape.
- 3. Individually wrapped sterile gauze squares in assorted sizes.
- 4. Sterile adhesive bandages in assorted sizes.
- 5. Tweezers.
- 6. Gauze rolled bandage. (first aid kit in classroom 101)
- 7. Triangular bandage.
- 8. Rounded end scissors.

9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).

- 10. A working digital thermometer.
- 11. Disposable non-latex gloves.
- 12. A working flashlight.

13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit.

14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.

15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration. (first aid kist in classroom 102)

16. Soap or waterless sanitizer (field trip or transporting away from the program only).

17. Bottled water (field trip or transporting away from the program only).



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

<u>Rule</u>: 5101:2-12-08 Medical Statement <u>Code</u>: The program staff medicals are required to be completed and on file at the program.

<u>Finding</u>: 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: 01/16/2022

## Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-08 Orientation Training & Whistle Blower Protection <u>Code</u>: The program is required to have staff complete the online staff orientation training.

<u>Finding</u>: 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 2 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: 01/16/2022



#### **Domain: 08 Staff Files**

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

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

<u>Finding</u>: 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 number 1 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: 01/16/2022

## Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to include all information.

<u>Finding</u>: 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 numbers 4a.

- 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: 01/16/2022

## Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

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

<u>Finding</u>: 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 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: 01/16/2022

## Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-07 Administrator Responsibilities/Requirements <u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 5, 6, below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.

2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.

3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.

4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.

5. At least one individual's schedule was not current.

6. At least one individual's position or role did not include an applicable group assignment.

7. At least one individual's employment had not been end dated.

8. Other: [ ]

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



Corrective Action Plan Due: 01/16/2022

## Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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: 01/16/2022

## Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to removed all medication, medical foods and topical products that are no longer being administered or have expired.

<u>Finding</u>: During the inspection, it was determined that medication, medical foods and/or topical products had not been removed from the program and were no longer needed or had expired. 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: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to use the appropriate form and retain current documentation to administer medications, medical foods and topical products. The program is also required to obtain separate documentation for each medication/product and child.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for the JFS 01217 "Request for Administration of Medication for Child Care" as noted in number 6 below:

- 1. The program used an old version of the JFS 01217.
- 2. The signature date on the JFS 01217 exceeded more than 12 months.
- 3. The time period to administer the medication or medical food on the JFS 01217 was exceeded.
- 4. The JFS 01217 included more than one medication or medical food.
- 5. The JFS 01217 included more than one child's name.
- 6. The prescription label was not current.

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

Corrective Action Plan Due: 01/16/2022

## Domain: 09 Children's Files

<u>Rule</u>: 5101:2-12-15 Child Medical and Enrollment Records <u>Code</u>: The program is required to have a completed medical on file at the program for each child enrolled.

<u>Finding</u>: 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, 5, 6, 7 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: 01/16/2022

# **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 |
| 5101:2-12-03 Inspection          | Compliant |   |
| Requirements                     |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant |   |
| Inspection                       |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection     | Compliant |   |
|                                  |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service  | Compliant | Documenting Statement: The off-site     |
| Requirements                     |           | food processing establishment's current |



|   |   | Ohio Department of Agriculture<br>registration information was observed<br>during the inspection.   |
|---|---|---|
| Rule: 5101:2-12-04 Food Service<br>Requirements   | Compliant   | Documenting Statement: During the<br>inspection, the requirements of the rule<br>regarding food service license or<br>exemption were discussed.                     |
| Rule: 5101:2-12-04 Food Service<br>Requirements   | Compliant   | Documenting Statement: The food service<br>license was observed posted. Following is<br>the audit number and date of expiration:<br>9913366, expires March 1, 2022. |
|   | 1   |   |
| Rule<br>5101:2-12-07 Administrator<br>Qualifications  | Status<br>Compliant   | Documenting Statement(s), If applicable   |
|   |   |   |
| Rule  | Status  | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-07 Written Program<br>Policies and Procedures   | Compliant   | Documenting Statement: During the<br>inspection, the requirements of the rule<br>regarding the program's written policies<br>and procedures were discussed.         |
| Rule  | Status  | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Child Care Staff Member<br>Educational Requirements  | Compliant   |   |
|   |   |   |
|   |   |   |
| Rule<br>5101:2-12-09 Background Check<br>Requirements   | Status<br>Compliant   | Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check<br>Requirements   | Compliant   |   |
| 5101:2-12-09 Background Check   |   | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check<br>Requirements<br>Rule<br>5101:2-12-11 Indoor Space<br>Requirements  | Compliant<br>Status<br>Compliant                                  | Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check<br>Requirements<br>Rule<br>5101:2-12-11 Indoor Space  | Compliant<br>Status   |   |
| 5101:2-12-09 Background Check<br>Requirements<br>Rule<br>5101:2-12-11 Indoor Space<br>Requirements<br>Rule<br>5101:2-12-11 Outdoor Play Equipment         | Compliant<br>Status<br>Compliant<br>Status<br>Compliant           | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check<br>Requirements<br>Rule<br>5101:2-12-11 Indoor Space<br>Requirements<br>Rule  | Compliant<br>Status<br>Compliant<br>Status                        | Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check<br>Requirements<br>Rule<br>5101:2-12-11 Indoor Space<br>Requirements<br>Rule<br>5101:2-12-11 Outdoor Play Equipment<br>Rule | Compliant<br>Status<br>Compliant<br>Status<br>Compliant<br>Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |



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| Rule                                | Status    | Documenting Statement(s), If applicable  |
|-------------------------------------|-----------|--|
| 5101:2-12-13 Sanitary Equipment and | Compliant |  |
| Environment                         | Compliant |  |
| Liviolinent                         |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-13 Handwashing            | Compliant |  |
| Requirements                        | Compliant |  |
| Requirements                        |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-13 Smoke Free             | Compliant |  |
| Environment                         | Compliant |  |
| Liwionnent                          |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-15 Medical/Physical Care  | Compliant | Documenting statement(s), if applicable  |
|                                     | Compliant |  |
| Plans                               |           |  |
| Pulo                                | Status    | Decumenting Statement(c) If englischie   |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: During the        |
| and General Emergency Plan          |           | inspection, the requirements of the rule |
|                                     |           | regarding medical, dental and general    |
|                                     |           | emergencies were discussed.              |
|                                     |           |  |
| Dula                                | Chabura   | Desumenting Statement(s) If emplicable   |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-16 Emergency Drills       | Compliant |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-16 Management of          | Compliant |  |
| Communicable Disease                |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Incident/Injury  | Compliant | Documenting Statement: The               |
| Reporting                           | Compliant | requirements for completing JFS 01299    |
| Reporting                           |           | "Incident/Injury Report For Child Care"  |
|                                     |           | reports were discussed during the        |
|                                     |           | inspection.                              |
|                                     |           | inspection.                              |
| L                                   | <u> </u>  |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: During the        |
| Plan                                |           | inspection, the requirements of the rule |
|                                     |           | regarding the written disaster plan were |
|                                     |           | discussed.                               |
|                                     |           | นเรนรรชน.                                |
| L                                   | <u> </u>  | I  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-17 Daily Schedule         | Compliant |  |
| JIDI.Z-IZ-I/ Dally Schedule         | Compilant |  |



| Rule                                       | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-12-17 Materials and                 | Compliant |   |
| Equipment                                  | compliant |   |
| Equipment                                  |           |   |
| Rule                                       | Status    | Documenting Statement(c) If applicable  |
|  |           | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play            | Compliant |   |
|  |           |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
|  |           | Documenting statement(s), if applicable |
| 5101:2-12-18 License Capacity              | Compliant |   |
|  |           |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio                   | Compliant | Documenting Statement: Staff/child      |
| Rule: 5101.2-12-18 Ratio                   | Compliant | -                                       |
|  |           | ratios observed during the inspection   |
|  |           | were in compliance.                     |
| [  |           |   |
| Dula                                       | Status    | Desumenting Statement(a) If surface la  |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size                    | Compliant |   |
|  |           |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-18 Attendance Records            |           |   |
| 5101.2-12-18 Attendance Records            | Compliant |   |
|  | I         |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision             | Compliant | Documenting Statement: Child Care Staff |
|  | compliant | Members were supervising the children   |
|  |           | and were able to intervene as needed.   |
|  |           | and were able to intervene as needed.   |
|  |           |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance                |           |   |
| 5101.2-12-19 Child Guidance                | Compliant |   |
|  |           | ]                                       |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping              | Compliant |   |
|  | Compliant |   |
| L  | I         |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack                | Compliant |   |
|  |           |   |
| Requirements                               |           |   |
| Rule                                       | Status    | Documenting Statement(c) If applicable  |
|  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements       | Compliant |   |
|  |           |   |
| Dula                                       | Status    | Documenting Statement(a) If applicable  |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
|  | Compliant |   |
| Handling/Storage                           | <u> </u>  |   |
| 5101:2-12-22 Safe Food<br>Handling/Storage | Compliant |   |

