



## 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 MILTON HEAD START CENTER	Program Number 000000408801	Program Type Child Care Center	
Address 3523 FAIRGREENS ROAD JACKSON OH 45640		County JACKSON	
Building Approval Date 10/18/1971	Use Group/Code E	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 10/19/2021	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 01/13/2022	Begin Time 8:06 AM	End Time 4:57 PM
Reviewer: DIANE GRIGGS		

Summary of Findings				
No. Rules Verified 56	No. Rules with Non-compliances 16	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 15

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
<b>Total Under 2 ½ Years</b>	0	0	0	0
Older Toddler		16	0	16
Preschool		28	0	28
School Age		0	0	0
<b>Total Capacity/Enrollment</b>	78	44	0	44

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Room 1	3 years to < 4 years	4 to 5	



Room 1	3 years to < 4 years	4 to 5	
Room 2	3 years to < 4 years	2 to 9	
Room 2	3 years to < 4 years	3 to 8	
Room 3	3 years to < 4 years	4 to 13	
Room 3	3 years to < 4 years	4 to 13	

**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**

**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) 2 below:

1. Owner;
2. Administrator;
3. Child Care Staff Member, employee.

Submit the program’s corrective action plan, which includes a statement the background check update has been requested, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/19/2022



**Domain: 09 Children's Files**

**Rule: 5101:2-12-25 Medication Administration**

**Code:** The program is required to use the appropriate form and retain current documentation to administer medications. The program is also required to obtain separate documentation for each medication and child, and retain on file each JFS 01217 "Request for Administration of Medication for Child Care" for at least one year. The program is required to administer medication only if it has the prescription label attached or has written instructions from a licensed physician. The program is also required to have each medication to be administered stored in its original container.

**Finding:** During the inspection, it was determined the program did not meet the requirement(s) for administering a medication or medical food that is not required by a JFS 01236 "Child Medical/Physical Care Plan for Child Care" or a prescription topical product to a child as noted in number(s) 1 below:

1. No JFS 01217 "Request for Administration of Medication for Child Care" was on file.
2. The child's name was missing on the JFS 01217.
3. The child's date of birth was missing on the JFS 01217 and was needed to determine the correct dosage.
4. The child's weight was missing on the JFS 01217 and was needed to determine the correct dosage.
5. The name of the medication was missing on the JFS 01217.
6. The exact dose was missing on the JFS 01217.
7. The time to administer was missing on the JFS 01217.
8. The time period to administer was missing on the JFS 01217.
9. The medication's expiration date was missing on the JFS 01217.
10. The Parent/Guardian's dated signature was missing on the JFS 01217.
11. Physician instructions were missing on the JFS 01217.
12. Possible side effects were missing on the JFS 01217.
13. Physician's dated signature was missing on the JFS 01217.
14. Physician's phone number was missing on the JFS 01217.
15. Date medication was administered was missing on the JFS 01217.
16. Time medication was administered was missing on the JFS 01217.
17. Dosage administered was missing on the JFS 01217.
18. Staff member's signature was missing on the JFS 01217.
19. A prescription label was not attached to the prescription medication.
20. The medication or product, [ ], was not brought to the program in its original container.
21. Parent instructions conflict with either the manufacturer or physician instructions.

Submit the program's corrective action plan, which includes the completed JFS 01217 for each child needed, verification that the prescription label is now attached, and/or verification that the medication or product is now in its original container, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/19/2022



**Domain: 09 Children's Files**

Rule: 5101:2-12-15 Medical/Physical Care Plans

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 8, 9, 13 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 02/19/2022

### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to post the staff to child ratios, age grouping, and maximum group size appendix in a noticeable area in the program.

Finding: During the inspection it was determined that Appendix A of this rule, "Staff/Child Ratios, Age Grouping and Maximum Group Size", was not posted in a noticeable area in 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 not required at this time.

#### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

Finding: 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(s) 4 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.
4. Stacked chairs on top of sensory table in room 1.
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: 02/19/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to provide equipment that is safe and hazard free.

Finding: During the inspection, equipment was determined to be unsafe or hazardous to children and in need of repair as noted in number(s) 6 below:

1. The equipment had sharp points or corners;
2. The equipment had splinters;
3. The equipment had protruding nails;
4. The equipment had loose or rusty parts;
5. The equipment had paint which contains lead or other poisonous materials;
6. The equipment had hazardous features: missing and bent slats on heater vents in room 1 ;
7. Other [ ].

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

Corrective Action Plan Due: 02/19/2022

**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 not required at this time.



**Domain: 04 Indoor/Outdoor Space**

**Rule:** 5101:2-12-11 Outdoor Play Equipment

**Code:** The program is required to provide equipment that does not pose a safety risk.

**Finding:** During the inspection, it was determined that outdoor play equipment was unsafe as noted in number(s) 1, 5, 9 below:

1. There was rust exposed on swings;
2. There was protruding bolts;
3. There were cracks;
4. There were holes;
5. There was splintering wood on the sheds;
6. There were sharp edges or points;
7. There were lead hazards;
8. There were toxic substances;
9. There were tripping hazards on steps of climber as they were peeling;
10. There was chipped and/or peeling paint;
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: 02/19/2022

**Domain: 04 Indoor/Outdoor Space**

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

**Code:** The program is required to conduct and document quarterly inspections of their outdoor play space.

**Finding:** During the inspection, it was determined that quarterly inspections (quarter 3 of 2021) of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/19/2022



**Domain: 05 Health & Safety**

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

**Code:** The program is required to have a first aid kit onsite.

**Finding:** During the inspection, it was determined first aid kit(s) 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 number(s) 3, 11, 14, 16, 17 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 in office kit.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.
6. Gauze rolled bandage.
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 in office kit.
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 in bus kit.
15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only) in bus kit.
17. Bottled water (field trip or transporting away from the program only) in bus kit.

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, 3 below:

1. Monthly fire drills.
2. Monthly weather emergency drills (March through September) (quarter 3 & 4 2020).
3. Emergency/lockdown drills in each quarter of the calendar year (quarter 4 2020).

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

Corrective Action Plan Due: 02/19/2022

**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: 02/19/2022

**Domain: 08 Staff Files**

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

Code: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

Finding: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 3 below:



1. The JFS 01176 Program Notification of Background Check Review for Child Care the program received from the Department was not on file and the individual was not left alone with children.
2. The JFS 01177 Individual Notification of Background Check Review for Child Care was on file instead of the JFS 01176.
3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/19/2022

**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(s) 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: 02/19/2022

**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(s) 3b.

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: 02/19/2022

**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: 02/19/2022

**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 number(s) 1, 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: 02/19/2022

**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(s) 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: 02/19/2022



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: 5101:2-12-02 Current Information	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding maintaining current information in the Ohio Child Licensing and Quality System were discussed.
Rule: 5101:2-12-03 Inspection Requirements	Compliant	
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: On the day of the inspection, the program was operating in compliance with the current building approval(s).
Rule: 5101:2-12-04 Fire Inspection	Compliant	
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: DRAY-BYAQQT, 3/1/22.
Rule: 5101:2-12-07 Administrator Qualifications	Compliant	
Rule: 5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	Documenting Statement: The administrator's hours of availability to meet with parents were posted in a noticeable location.
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-07 Written Program Policies and Procedures	Not Verified	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Indoor Space Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-13 Sanitary Equipment and Environment	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding sanitary equipment and environment were discussed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Children were viewed washing their hands, as required by the rule.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-13 Toothbrushing Requirements	Compliant	Documenting Statement: Tooth brushing is practiced by the program and it was determined to meet the requirements outlined in the rule.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>



Rule: 5101:2-12-14 Transportation - Driver Requirements	Compliant	Documenting Statement: The driver(s) had completed the required ODJFS driver training.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: During the inspection, weekly safety inspections and/or monthly emergency exiting drills were completed and documented, as required [using the ODJFS sample form].
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding children's medical statements and enrollments forms were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding management of communicable diseases were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Not Verified	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play was observed for all group(s).
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 License Capacity	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes observed on the day of the inspection were in compliance.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-18 Attendance Records	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding attendance records were discussed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: During the inspection, child care staff were observed assisting children throughout the day.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-19 Child Guidance	Compliant	Documenting Statement: Appropriate child guidance techniques and practices were observed being used during the inspection.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were placed appropriately and safely during nap time.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: The menu posted reflected the meal served.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Fluid Milk Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>





Rule: 5101:2-12-22 Safe Food Handling/Storage	Compliant	Documenting Statement: Food was stored in a safe and sanitary manner.
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