

# **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          |                 | Program Type       |
| KIDS KORNER OF LEXINGTON                             | 000000409251            |                 | Child Care Center  |
| Address<br>124 PLYMOUTH STREET LEXINGTON<br>OH 44904 |                         |                 | County<br>RICHLAND |
| Building Approval Date                               | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½  |
| 03/18/2021   | E                       | 50              |                    |
| Fire Inspection Approval Date                        | Food Service Risk Level |                 |                    |
| 05/16/2022   | Level III               |                 |                    |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection So                  | cope             | Inspection Notice |              |
| Follow-up                  | Full                           |                  | Unannounced       |              |
| Inspection Date 05/31/2022 | Begin Time 1                   | 0:00 AM          | End Time 12:30 PM |              |
| Reviewer: MATTHEW PIGNATO  |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 9                              | 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)                                  |                  | 7          | 0         | 7     |
| Young Toddler   |                  | 4          | 0         | 4     |
| Total Under 2 ½ Years                                     | 16               | 11         | 0         | 11    |
| Older Toddler   |                  | 2          | 0         | 2     |
| Preschool   |                  | 15         | 0         | 15    |
| School Age  |                  | 1          | 0         | 1     |
| Total Capacity/Enrollment                                 | 45               | 18         | 0         | 29    |

| Staff-Child Ratios at the Time of Inspection |                  |                |         |
|--|------------------|----------------|---------|
| Group  | Age Group/Range  | Ratio Observed | Comment |
| Infant                                       | 0 to < 12 months | 2 to 3         | 1st     |

| Infant                        | 0 to < 12 months         | 1 to 3  | 2nd |
|-------------------------------|--------------------------|---------|-----|
| Older Infant/Young Toddler    | 12 months to < 18 months | 1 to 6  | 1st |
| Older Infant/Young Toddler    | 12 months to < 18 months | 1 to 6  | 2nd |
| Older Toddler/Young Preschool | 30 months to < 36 months | 2 to 5  | 1st |
| Older Toddler/Young Preschool | 30 months to < 36 months | 2 to 5  | 2nd |
| Preschool                     | 3 years to < 4 years     | 1 to 10 | 1st |
| Preschool                     | 3 years to < 4 years     | 2 to 10 | 2nd |

## **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  |  |
|   |  |
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|   |  |
|   |  |
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| Moderate Risk Non-Compliances   |  |
| No Moderate Risk Non-Compliances were observed during this inspection |  |
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|   |  |

#### **Low Risk Non-Compliances**

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: 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.

<u>Finding</u>: 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 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: 06/30/2022

#### **Domain: 02 Safe & Sanitary Environment**

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

<u>Code</u>: The program is required to use an appropriate germicidal solution to sanitize equipment.

<u>Finding</u>: During the inspection, it was determined that an appropriate germicidal solution was not used to sanitize the diaper changing pad, as required by Appendix A of this rule, as noted in number 1 below:

- 1. The manufacturer's directions were not followed;
- 2. The solution used was not a commercial product registered by the United States Environmental Protection Agency as a sanitizer;
- 3. 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: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all children wash their hands as outlined in rule.

<u>Finding</u>: During the inspection, it was determined that at least one child in the Older Infant/Young Toddler group did not wash his or her hands at the time listed in number 3 below, as required in rule.

- 1. Upon arrival.
- 2. Prior to departure.
- 3. After toileting/diaper change.
- 4. After contact with bodily fluids.
- 5. After returning from outdoor play.
- 6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.
- 7. Before eating or assisting with food preparation.
- 8. After water activities.
- 9. When visibly soiled (must use soap and water)
- 10. Other [ ].

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

Corrective Action Plan Due: 06/30/2022

#### **Domain: 03 Postings & Equipment**

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

<u>Code</u>: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

<u>Finding</u>: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number 8 below:

- 1. The plan was not posted in each classroom.
- 2. The plan was not posted in other spaces used by children.
- 3. The name, address and telephone number of the program were not complete.
- 4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
- 5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
- 6. Location of children's records was not complete.
- 7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.

- 8. The current version of the prescribed form was not used.
- 9. The plan was not implemented when necessary in that [ ].

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

Corrective Action Plan Due: 06/30/2022

#### **Domain: 04 Indoor/Outdoor Space**

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

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

<u>Finding</u>: During the inspection, it was determined that the balance beam and train were positioned such that the fall zone requirement in number 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: 06/30/2022

#### **Domain: 04 Indoor/Outdoor Space**

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

<u>Code</u>: The program is required to provide adequate fall surface for the outdoor play space.

<u>Finding</u>: During the inspection it was determined that the fall surface material used as noted in number 2 below had not been checked, and the material turned over or raked as needed, as required by the rule:

- 1. Mulch;
- 2. Woodchips;
- 3. Sand;
- 4. Pea gravel;
- 5. Gravel;
- 6. Shredded tires:
- 7. 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: 08 Staff Files**

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

<u>Code</u>: The program is required to have a designated employee that has access to all records and handles emergencies in charge if the administrator is absent.

<u>Finding</u>: During the inspection, it was determined the role of the designee did not meet the requirements as noted in number 1 below:

- 1. Have access to all records;
- 2. Handle all emergencies.

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: 5101:2-12-08 Medical Statement

Code: 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 employees 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: 06/30/2022

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

Rule: 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 number 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: 06/30/2022

**Domain: 08 Staff Files** 

Rule: 5101:2-12-08 Medical Statement

Code: 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 4.

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test
- a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/30/2022

#### Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to store medical foods and topical products out of the reach of children.

<u>Finding</u>: During the inspection, it was determined that a medical food or topical product, diaper cream, was within the reach of children in the older infant/young toddler room. 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.



<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, 2 below:

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

11. Other [ ]

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

Corrective Action Plan Due: 06/30/2022

#### **Domain: 09 Children's Files**

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

<u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 1, 2, 15 below.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list

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

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

### **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 |
| 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: 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 5/16/23.   |
| Rule   | Status             | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Food Service<br>Requirements                        | Compliant          | bocumenting statement(s), if applicable   |
| Rule   | Status             | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator<br>Qualifications                     | Compliant          | boodinenting statement(s), it applicable  |
| Rule   | Status             | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Written Program Policies and Procedures             | Compliant          | a commence of the commence of |
| Rule   | Status             | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Child Care Staff Member<br>Educational Requirements | Compliant          | bocamenting statement(s), it applicable   |
| Rule   | Status             | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection    | Compliant          | bocamenting statement(s), it applicable   |
| Rule   | Status             | Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check<br>Requirements                    | Compliant          | bocamenting statement(s), it applicable   |
| Rule   | Status             | Decumenting Statement(s) If applicable  |
| 5101:2-12-10 Health Training<br>Requirements                     | Compliant          | Documenting Statement(s), If applicable   |
|  | T -                |   |
| Rule 5101:2-12-10 Professional Development Requirements          | Status   Compliant | Documenting Statement(s), If applicable   |
| Rule   | Status             | Documenting Statement(s), If applicable   |

| Desiring.                                       |           |   |
|---|-----------|---|
| 5101:2-12-11 Indoor Space                       | Compliant |   |
| Requirements                                    |           |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children             | Compliant |   |
| Under 2 1/2 Years                               |           |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Space                      | Compliant |   |
| Requirements                                    |           |   |
|   |           |   |
| 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 |
| 5101:2-12-12 Safe Environment                   | Compliant |   |
|   |           |   |
| Rule  | Status    | Decumenting Statement(s) If applicable  |
| 5101:2-12-13 Smoke Free                         | Compliant | Documenting Statement(s), If applicable |
|   | Compilant |   |
| Environment                                     |           |   |
| Rule  | Status    | Decumenting Statement(s) If applicable  |
| 5101:2-12-15 Medical/Physical Care              |           | Documenting Statement(s), If applicable |
| Plans   | Compliant |   |
| Pidiis  |           |   |
| Dulo  | Ctatus    | Decumenting Statement(s) If applicable  |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills                   | Compliant |   |
|   | 1         |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard                 | Compliant | Documenting statement(s), it applicable |
| Precautions                                     | Compliant |   |
| 1 recautions                                    |           |   |
| Pulo  | Status    | Documenting Statement/s) If applicable  |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of Communicable Disease | Compliant |   |
| Communicable Disease                            |           |   |
| Dula  | Chahus    | Decumentia - Statement (-) (5           |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury                    | Compliant |   |
| Reporting                                       |           |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan              | 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           | Compliant |   |
| Equipment                            |           |   |
|                                      | -         |   |
| 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 |   |
|                                      |           |   |
| D. J.                                | Chahara   | Decomposition Chateron and/a\ If a maliable |
| 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 | Bocamenting statement(3), if applicable     |
| 3101.2-12-19 Clina Galdance          | Compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-20 Cots and Napping        | Compliant |   |
|                                      |           |   |
|                                      | •         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-20 Cribs                   | Compliant | -   |
|                                      | ·         |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-22 Meal and Snack          | Compliant |   |
| Requirements                         |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-22 Fluid Milk Requirements | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |



| 5101:2-12-22 Safe Food<br>Handling/Storage | Compliant |   |
|--|-----------|---|
|  | 1 -       |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care             | Compliant |   |
|  |           |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food        | Compliant |   |
| Preparation                                | ·         |   |
|  |           |   |
| Rule                                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet          | Compliant |   |
| Training                                   | ,         |   |