

# **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            | nils            |                   |
|---------------------------------|-------------------------|-----------------|-------------------|
| Program Name                    | Program Number          |                 | Program Type      |
| LAWRENCE COUNTY EARLY CHILDHOOD | 000000411224            |                 | Child Care Center |
| ACADEMY - IRONTON               |                         |                 |                   |
| Address                         |                         |                 | County            |
| 305 N. 7TH ST IRONTON           |                         |                 | LAWRENCE          |
| OH 45638                        |                         |                 |                   |
|                                 |                         |                 |                   |
|                                 |                         |                 |                   |
| Building Approval Date          | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |
| 09/22/2010                      | Е                       |                 |                   |
| Fire Inspection Approval Date   | Food Service Risk Level |                 |                   |
| 08/20/2018                      | Level III               |                 |                   |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection So                  | cope             | Inspection Notice |              |
| Annual                     | Full                           |                  | Unannounced       |              |
| Inspection Date 10/20/2022 | Begin Time 9                   | :30 AM           | End Time 3:30 PM  |              |
| Reviewer:                  |                                |                  |                   |              |
| Rebecca Worrell            |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 4                              | 0                | 0                 | 4            |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |       |
|   | Totals           | Full Time  | Part Time | Total |
| Infant (Birth to < 18 m)                                  |                  | 8          | 0         | 8     |
| Young Toddler   |                  | 9          | 0         | 9     |
| Total Under 2 ½ Years                                     | 22               | 17         | 0         | 17    |
| Older Toddler   |                  | 6          | 0         | 6     |
| Preschool   |                  | 53         | 0         | 53    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 167              | 59         | 0         | 76    |

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

| Infant         | 0 to < 12 months         | 2 to 4  | at arrival       |
|----------------|--------------------------|---------|------------------|
| Infant         | 0 to < 12 months         | 2 to 4  | nap              |
| Toddler 1      | 18 months to < 30 months | 2 to 6  | at arrival       |
| Toddler 1      | 18 months to < 30 months | 2 to 6  | nap              |
| Toddler 2      | 18 months to < 30 months | 3 to 5  | at arrival       |
| Toddler 2      | 30 months to < 36 months | 3 to 6  | nap              |
| Preschool RM 4 | 30 months to < 36 months | 2 to 12 | nap              |
| Preschool RM 4 | 30 months to < 36 months | 2 to 11 | at arrival (one  |
|                |                          |         | child under 3 is |
|                |                          |         | transitioning)   |
| Preschool RM 5 | 3 years to < 4 years     | 2 to 17 | breakfast        |
| Preschool RM 5 | 3 years to < 4 years     | 3 to 18 | nap              |
| Preschool RM 6 | 3 years to < 4 years     | 2 to 14 | at arrival       |
| Preschool RM 6 | 3 years to < 4 years     | 2 to 16 | nap              |

# **Summary of Non-Compliances**

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

| Serious Risk Non-Compliances   |  |  |
|--|--|--|
| No Serious Risk Non-Compliances were observed during this inspection |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

| Moderate Risk Non-Compliances        |                                   |  |
|--------------------------------------|-----------------------------------|--|
| No Moderate Risk Non-Compliances wer | e observed during this inspection |  |
|                                      |                                   |  |
|                                      |                                   |  |
|                                      |                                   |  |
|                                      |                                   |  |



## **Low Risk Non-Compliances**

#### **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(s)3, 4, & 5 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: 11/20/2022

**Domain: 08 Staff Files** 

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



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

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2,3,4,5 & 6 below:

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

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

Corrective Action Plan Due: 11/20/2022

### **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(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: 11/20/2022

#### 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 number(s) 13 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.

| Status      | Documenting Statement(s), If applicable  |
|-------------|--|
| Compliant   |  |
|             |  |
|             |  |
| Status      | Documenting Statement(s), If applicable  |
| Compliant   |  |
|             |  |
| Status      | Documenting Statement(s), If applicable  |
|             | Documenting Statement(s), if applicable  |
| Compliant   |  |
|             |  |
| Status      | Documenting Statement(s), If applicable  |
|             | Documenting statement(s), it applicable  |
| Compilation |  |
| _1          | <u> </u>   |
| Status      | Documenting Statement(s), If applicable  |
|             |  |
|             |  |
|             |  |
| Status      | Documenting Statement(s), If applicable  |
| Compliant   | Documenting Statement: The food service  |
|             | license was observed posted. Following is  |
|             | the audit number and date of expiration:   |
|             | Audit number GCAP-CCZNN4.  |
|             |  |
| Terr        |  |
|             | Documenting Statement(s), If applicable  |
| Compliant   |  |
|             |  |
| Status      | Documenting Statement(s), If applicable  |
|             | Documenting Statement(s), if applicable  Documenting Statement: The written  |
| Compliant   | policies and procedures reviewed on the  |
|             | day of the inspection were verified as   |
|             | complete.  |
|             | complete.  |
| _1          |  |
| Status      | Documenting Statement(s), If applicable  |
| Compliant   | Documenting Statement: All employees   |
|             | had current medical statements on file.  |
|             |  |
|             |  |
| Status      | Documenting Statement(s), If applicable  |
| Compliant   | Documenting Statement: All Child Care  |
|             | Staff Members had verification of  |
|             | educational requirements on file at the  |
| 1           | program.   |
|             | Status Compliant  Status Compliant |

| Dule  | Chahua                         | Decree entire Chatamanta If applicable   |
|---|--------------------------------|--|
| Rule  | Status                         | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Orientation  | Compliant                      | Documenting Statement: On the day of   |
| Training & Whistle Blower Protection  |                                | the inspection, all child care staff   |
|   |                                | members had met orientation training   |
|   |                                | requirements.  |
|   |                                |  |
|   |                                |  |
| Rule  | Status                         | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check   | Compliant                      | Documenting Statement: During the  |
| Requirements  | '                              | inspection, the required documentation   |
| . Regainements  |                                | regarding background checks was on file  |
|   |                                | for all employees listed.  |
|   |                                | Tot all employees listed.  |
|   |                                |  |
| Rule  | Status                         | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space   |                                | bocumenting statement(s), if applicable  |
| •   | Compliant                      |  |
| Requirements  |                                |  |
| Г .   |                                |  |
| 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  |
| Rule: 5101:2-12-11 Outdoor Space  | Compliant                      | Documenting Statement: The quarterly   |
| Requirements  |                                | playground inspections were completed  |
| ·   |                                | and documented, as required. The most  |
|   |                                | recent inspection report form was dated  |
|   |                                | 9/20/22.   |
|   |                                | 3/20/22.   |
|   |                                | <b>_</b>   |
|   |                                |  |
| l Pula  | I Status                       | Documenting Statement(s) If applicable   |
| Rule  | Status                         | Documenting Statement(s), If applicable  |
| Rule<br>5101:2-12-11 Outdoor Play Equipment   | Compliant                      | Documenting Statement(s), If applicable  |
|   |                                | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Outdoor Play Equipment   | Compliant                      |  |
| 5101:2-12-11 Outdoor Play Equipment  Rule   | Compliant                      | Documenting Statement(s), If applicable  |
| S101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall                  | Compliant                      | Documenting Statement(s), If applicable Documenting Statement: The protective  |
| 5101:2-12-11 Outdoor Play Equipment Rule  | Compliant                      | Documenting Statement(s), If applicable  Documenting Statement: The protective material used under outdoor equipment   |
| S101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall                  | Compliant                      | Documenting Statement(s), If applicable Documenting Statement: The protective  |
| S101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall                  | Compliant                      | Documenting Statement(s), If applicable  Documenting Statement: The protective material used under outdoor equipment   |
| Rule Rule: 5101:2-12-11 Outdoor Play Equipment  Zones   | Status Compliant               | Documenting Statement(s), If applicable  Documenting Statement: The protective material used under outdoor equipment was shredded rubber.  |
| Rule Rule: 5101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall Zones | Status Compliant Status Status | Documenting Statement(s), If applicable  Documenting Statement: The protective material used under outdoor equipment was shredded rubber.  Documenting Statement(s), If applicable                                     |
| Rule Rule: 5101:2-12-11 Outdoor Play Equipment  Zones   | Status Compliant               | Documenting Statement(s), If applicable  Documenting Statement: The protective material used under outdoor equipment was shredded rubber.  |
| Rule Rule: 5101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall Zones | Status Compliant Status Status | Documenting Statement(s), If applicable  Documenting Statement: The protective material used under outdoor equipment was shredded rubber.  Documenting Statement(s), If applicable                                     |
| Rule Rule: 5101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall Zones | Status Compliant Status Status | Documenting Statement(s), If applicable Documenting Statement: The protective material used under outdoor equipment was shredded rubber.  Documenting Statement(s), If applicable Documenting Statement: Equipment was |
| Rule Rule: 5101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall Zones | Status Compliant Status Status | Documenting Statement(s), If applicable Documenting Statement: The protective material used under outdoor equipment was shredded rubber.  Documenting Statement(s), If applicable Documenting Statement: Equipment was |
| Rule Rule: 5101:2-12-11 Outdoor Play Equipment  Rule Rule: 5101:2-12-11 Outdoor Play Fall Zones | Status Compliant Status Status | Documenting Statement(s), If applicable Documenting Statement: The protective material used under outdoor equipment was shredded rubber.  Documenting Statement(s), If applicable Documenting Statement: Equipment was |

| Pulo: E101:2 12 12 Cofo Environment   | Compliant   | Documenting Statement: A cofe                |
|---------------------------------------|-------------|--|
| Rule: 5101:2-12-12 Safe Environment   | Compliant   | Documenting Statement: A safe                |
|                                       |             | environment was observed during the          |
|                                       |             | inspection. Children were protected from     |
|                                       |             | items and conditions which threaten their    |
|                                       |             | health, safety and well-being.               |
|                                       |             | fleatti, safety and well-being.              |
|                                       |             |  |
| Rule                                  | Status      | Documenting Statement(s), If applicable      |
| 5101:2-12-13 Sanitary Equipment and   | Compliant   |  |
| Environment                           |             |  |
|                                       | _           |  |
| Rule                                  | Status      | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-13 Handwashing        | Compliant   | Documenting Statement: Staff and             |
| Requirements                          |             | children were observed washing hands as      |
|                                       |             | required by the rule.                        |
|                                       |             |  |
|                                       |             |  |
| Rule                                  | Status      | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-13 Smoke Free         | Compliant   | Documenting Statement: A notice was          |
| Environment                           | ·           | observed posted stating that smoking is      |
|                                       |             | prohibited at the program.                   |
|                                       |             | prombited at the program.                    |
|                                       |             |  |
| Rule                                  | Status      | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-13 Toothbrushing      | Compliant   | Documenting Statement: Tooth brushing        |
| Requirements                          | · ·         | is practiced by the program and it was       |
| The quite enterties                   |             | determined to meet the requirements          |
|                                       |             | outlined in the rule.                        |
|                                       |             | outlined in the rule.                        |
|                                       |             |  |
| Rule                                  | Status      | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-14 Transportation and | Compliant   | Documenting Statement: The driver(s)         |
| Field Trip Procedures                 | Compilation | had current and valid training in first aid, |
| Tiela Trip Procedures                 |             |  |
|                                       |             | management of communicable disease,          |
|                                       |             | and CPR.                                     |
| Rule: 5101:2-12-14 Transportation and | Compliant   | Documenting Statement: The form(s)           |
| •                                     |             | _  |
| Field Trip Procedures                 |             | used by the program for routine and/or       |
|                                       |             | field trips were verified to meet the        |
|                                       |             | requirements of the rule.                    |
|                                       |             |  |
| Dulo                                  | Ctatus      | Decumenting States and a life will add       |
| Rule                                  | Status      | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-14 Transportation -   | Compliant   | Documenting Statement: The driver(s)         |
| Driver Requirements                   |             | had completed the required ODJFS driver      |
|                                       |             | training.                                    |
|                                       |             |  |
| Dul                                   | Chabina     | Daniel Chaham II Vis II II                   |
| Rule                                  | Status      | Documenting Statement(s), If applicable      |

| Designation.   |           |   |
|--|-----------|---|
| Rule: 5101:2-12-14 Transportation -<br>Vehicle Requirements    | Compliant | Documenting Statement: The vehicle(s) used by the program to transport children are inspected and licensed by the Ohio State Highway Patrol.  |
| Rule: 5101:2-12-14 Transportation -<br>Vehicle Requirements    | Compliant | Documenting Statement: During the inspection, weekly safety inspections and/or monthly emergency exiting drills were completed and documented, as required.                                 |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-15 Medical/Physical<br>Care Plans              | Compliant | Documenting Statement: The program had current information on the medical status and the required treatment plan for the children with health conditions.                                   |
|  |           | 100000000000000000000000000000000000000   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required. |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills                            | Compliant | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 First Aid/Standard Precautions              | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required.  |
| Rule: 5101:2-12-16 First Aid/Standard Precautions              | Compliant | Documenting Statement: The program had a system in place for regularly checking and replacing first aid kit supplies.   |
| Pulo   | Status    | Documenting Statement(e) If applicable  |
| Rule: 5101:2-12-16 Management of                               | Status    | Documenting Statement(s), If applicable  Documenting Statement: The JFS 08087   |
| Communicable Disease   | Compliant | "Communicable Disease Chart" was  |

|  |                     | posted and was readily available to staff and parents.  |
|--|---------------------|---|
| 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   |
| Rule: 5101:2-12-16 Written Disaster<br>Plan  | Compliant           | Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.                                     |
| Dula   | Chahua              | Described Chatage ant/a) If a miliable  |
| Rule: 5101:2-12-17 Daily Schedule            | Status<br>Compliant | Documenting Statement(s), If applicable  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   |
| 5101:2-12-17 Daily Outdoor Play              | Compliant           |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-18 License Capacity                | Compliant           | Documenting Statement(s), if applicable   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Ratio                     | Compliant           | Documenting Statement(s), if applicable  Documenting Statement: Staff/child ratios observed during the inspection surpassed those required by the rule.     |
| Rule: 5101:2-12-18 Ratio                     | Compliant           | Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required. |
| Rule   | Status              | Documenting Statement(s), If applicable   |

| Rule: 5101:2-12-18 Group Size   | Compliant         | Documenting Statement: The group sizes observed on the day of the inspection were in compliance.  |  |  |
|---|-------------------|---|--|--|
|   |                   |   |  |  |
| Rule  | Status            | Documenting Statement(s), If applicable   |  |  |
| Rule: 5101:2-12-18 Attendance<br>Records  | Compliant         | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times. |  |  |
|   |                   |   |  |  |
| Rule  | Status            | Documenting Statement(s), If applicable   |  |  |
| Rule: 5101:2-12-19 Supervision  | Compliant         | Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group.   |  |  |
| P.J.  | Chahara           |   |  |  |
| Rule 5101:2-12-19 Child Guidance  | Status            | Documenting Statement(s), If applicable   |  |  |
| 5101:2-12-19 Child Guidance   | Compliant         |   |  |  |
| Rule  | Status            | Documenting Statement(s), If applicable   |  |  |
| 5101:2-12-20 Cots and Napping   | Compliant         |   |  |  |
|   |                   |   |  |  |
| Rule  | Status            | Documenting Statement(s), If applicable   |  |  |
| Rule: 5101:2-12-20 Cribs  | Compliant         | Documenting Statement: Cribs were   |  |  |
|   |                   | separated from the play space by a safe and sturdy and physical barrier.  |  |  |
|   |                   |   |  |  |
| Rule: 5101:2-12-20 Cribs  | Compliant         | Documenting Statement: All cribs were labeled with the assigned infant's name.  |  |  |
|   |                   | labeled with the assigned infant's name.  |  |  |
| Rule  | Status            | Documenting Statement(s), If applicable   |  |  |
| Rule Rule: 5101:2-12-22 Meal and Snack  |                   | Documenting Statement(s), If applicable Documenting Statement: The menu was   |  |  |
| Rule  | Status            | Documenting Statement(s), If applicable   |  |  |
| Rule Rule: 5101:2-12-22 Meal and Snack  | Status  Compliant | Documenting Statement(s), If applicable Documenting Statement: The menu was posted main entry parent board.   |  |  |
| Rule Rule: 5101:2-12-22 Meal and Snack Requirements Rule: 5101:2-12-22 Meal and Snack | Status            | Documenting Statement(s), If applicable Documenting Statement: The menu was   |  |  |
| Rule Rule: 5101:2-12-22 Meal and Snack Requirements                                   | Status  Compliant | Documenting Statement(s), If applicable Documenting Statement: The menu was posted main entry parent board.  Documenting Statement: Substituted   |  |  |

| 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               | Compliant |   |
| Handling/Storage                     |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care       | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were |
| Food Preparation                     |           | labeled as required.                    |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet    | Compliant |   |
| Training                             |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication              | Compliant |   |
| Administration                       |           |   |
|                                      |           |   |