## **Family Child Care 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 Details     |                 |                   |
|---------------------|-----------------|-------------------|
| Program Name        | Program Number  | Program Type      |
| COMBS, MONICA       | 000000970731798 | FCC - Type B Home |
| Address             |                 | County            |
| 18 W. DALTON STREET |                 | SUMMIT            |
|                     |                 |                   |
| AKRON               |                 |                   |
| OH 44310            |                 |                   |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection So                  | cope             | Inspection Notice |              |
| Compliance             | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time                     |                  | End Time          |              |
| 04/28/2022             | 10:15 AM                       |                  | 1:15 PM           |              |
| Reviewer:              |                                |                  |                   |              |
| Yeremika Hodoh         |                                |                  |                   |              |
| Summary of Findings    |                                |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 68                     | 5                              | 0                | 0                 | 6            |

| 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)                                 |                  | 1          | 0         | 1     |
| Young Toddler                                             |                  | 2          | 1         | 3     |
| Total Under 2 Years                                       | 3                | 3          | 1         | 4     |
| Older Toddler                                             |                  | 0          | 0         | 0     |
| Preschool                                                 |                  | 2          | 5         | 7     |
| School Age                                                |                  | 2          | 2         | 4     |
| Total Capacity/Enrollment                                 | 6                | 4          | 7         | 15    |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|----------------------------------------------|-----------------|----------------|---------|
| Group                                        | Age Group/Range | Ratio Observed | Comment |
| Monica                                       |                 | 1 to 3         |         |



### **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: 2-13-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

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

**Domain: 04 Indoor/Outdoor Space** 

Rule: 5101:2-13-11 Outdoor Space

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

Findings: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence or natural barrier that ensured children were not able to leave the

playground area. The fence or natural barrier was determined to not present an immediate risk for a child to be able to leave the program as noted in number(s) 2 & 3 below:

- 1. The fence, natural barrier, or combination of a fence and natural barrier was not continuous.
- 2. The fencing had missing slat boards through which children could leave the program.
- 3. The fencing was broken.
- 4. The fencing was loose.
- 5. The fencing was rotting.
- 6. The gate was broken and did not close.
- 7. The latch on the gate was broken.
- 8. The latch was easily opened by children on the playground.
- 9. The gate had no latch.
- 10. Other [].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/01/2022

#### **Domain: 07 Diapering & Infant Care**

Rule: 5101:2-13-23 Infant Bottle and Food Preparation

Code: The program is required to retain and update infant feeding instructions.

Findings: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review form were not updated, as required by this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/01/2022

#### Domain: 09 Children's Files

Rule: 5101:2-13-15 Health Conditions

Code: The program is required to have a completed JFS 01236 "Medical/Physical Care Plan" on file for each condition for each child, which is updated annually and retained for at least one year.

Findings: In review of records, it was determined the JFS 01236 "Medical/Physical Care Plan for Child Care" did not meet the requirements of the rule as noted in number(s) 1 below:

- 1. The JFS 01236 had not been updated annually
- 2. A separate JFS 01236 had not been used for each condition
- 3. The program used an old version of the JFS 01236

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

Corrective Action Plan Due: 06/01/2022

Domain: 09 Children's Files

Rule: 5101:2-13-25 Medication Requirements

Code: The program is required to have a current and completed JFS 01217 on file.

Findings: During the inspection, it was determined that the program did not meet the requirements for the JFS 01217 "Request for Administration of Medication for Child Care" as noted in number(s) 3 below:

- 1. The JFS 01217 was missing or incomplete for a medical food that was not required by a JFS 01236 "Child Medical/Physical Care Plan for Child Care".
- 2. The program used an old version of the JFS 01217.
- 3. The signature date on the JFS 01217 exceeded more than 12 months.
- 4. The time period to administer medication on the JFS 01217 was exceeded.
- 5. The JFS 01217 included more than one child's name.
- 6. The JFS 01217 included more than one medication or medical food.
- 7. The prescription label was not current.

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

Corrective Action Plan Due: 06/01/2022

#### Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review 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) 4 & 8 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 [ ]

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

Corrective Action Plan Due: 06/01/2022

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 9 & 10 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.

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Corrective Action Plan Due: 06/01/2022

# Rules In-Compliance/Not Verified

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|-------------------------------------|-----------|-----------------------------------------|
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 License Visible        | Compliant |                                         |
|                                     |           |                                         |
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| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS   | Compliant | 4-17                                    |
| 3101.2 13 02 information in occos   | Compliant |                                         |
|                                     |           |                                         |
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| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical       | Compliant |                                         |
|                                     |           |                                         |
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|                                     | •         | <u> </u>                                |
| Rule                                | Status    | Documenting Statement(s), If applicable |
|                                     |           | bocumenting statement(3), if applicable |
| 5101:2-13-03 Inspection             | Compliant |                                         |
| Requirements                        |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements  | Compliant |                                         |
| for Type B Homes                    |           |                                         |
| Tot Type billotties                 |           |                                         |
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| Dulo                                | Chahua    | Description Chales and I am I am I      |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant |                                         |
| Homes                               |           |                                         |
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|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and          | Compliant | 200aa.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a   |
|                                     | Compliant |                                         |
| Combustible Materials in a Type B   |           |                                         |
| Home                                |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B    | Compliant | G                                       |
|                                     | Compliant |                                         |
| Home                                |           |                                         |
|                                     | 1         |                                         |
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| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records          | Compliant |                                         |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
|---------------------------------------|-----------|------------------------------------------|
| 5101:2-13-07 Type B Provider - Foster | Compliant | g statement (o), it applicable           |
| Parent                                | Compliant |                                          |
| Turche                                |           |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-08 Employee Requirements    | Compliant | Boodinenting otatement(s), it applicable |
| 3101.2 13 00 Employee Requirements    | Compilant |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-08 Child Care Staff         | Compliant | bocamenting statement(s), it applicable  |
|                                       | Compliant |                                          |
| Requirements                          |           |                                          |
|                                       |           |                                          |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
|                                       |           | bocumenting statement(s), if applicable  |
| 5101:2-13-08 Whistle Blower           | Compliant |                                          |
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| Pulo                                  | Chatus    | Degumenting Statements of the section is |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-09 Background Checks        | Compliant |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-10 Health Training          | Compliant |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-10 Professional             | Compliant |                                          |
| Development                           |           |                                          |
|                                       |           |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-11 Outdoor Equipment        | Compliant |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-11 Fall Zone                | Compliant |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-12 Safe Equipment           | Compliant |                                          |
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| Rule                                  | Status    | Documenting Statement(s), If applicable  |
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| 5101:2-13-12 Safe Environment                                  | Compliant           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
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| Rule 5101:2-13-13 Clean environment and equipment              | Status<br>Compliant | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Rule                                                           | Chabine             | Decumenting Statement(s) If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 5101:2-13-13 Handwashing                                       | Compliant           | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Rule                                                           | Status              | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 5101:2-13-13 Smoke Free                                        | Compliant           | g to the state of |
|                                                                |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Rule<br>5101:2-13-13 Toothbrushing                             | Status<br>Compliant | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Rule                                                           | Status              | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 5101:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Rule                                                           | Status              | Decumenting Chatemant/a) If a mulicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 5101:2-13-14 Driver Requirements                               | Compliant           | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Rule                                                           | Status              | Documenting Statement(c) If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 5101:2-13-15 Child Records Retention and Confidentiality       | Compliant           | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                |                     | D :: (C)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Rule 5101:2-13-16 Medical, Dental, and General Emergency Plan  | Status   Compliant  | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Rule                                                           | Status              | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 5101:2-13-16 Emergency Drills                                  | Compliant           | bocamenting statement(s), if applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
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| Rule 5101:2-13-16 First Aid Kit/Standard Precautions           | Compliant Compliant | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

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|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases  | Compliant |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
|                                     |           | bocumenting statement(s), if applicable |
| 5101:2-13-16 Incident/Injury        | Compliant |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan          | Compliant |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
|                                     | l         |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance             |           | bocumenting statement(3), if applicable |
| 5101:2-15-18 Attendance             | Compliant |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision            | Compliant |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
|                                     | •         |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | bocamenting statement(s), it applicable |
| 3101.2-13-19 3chool Age Supervision | Compliant |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance         | Compliant |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap          | Compliant |                                         |
|                                     | Compilant |                                         |
| Requirements                        |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen       | Compliant |                                         |
| Requirements                        |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight  | Compliant |                                         |
|                                     | Compilant |                                         |
| Care                                |           |                                         |
|                                     |           |                                         |
|                                     |           |                                         |

| Rule                                   | Status              | Documenting Statement(s), If applicable |
|----------------------------------------|---------------------|-----------------------------------------|
| 5101:2-13-21 Sanitary Environment      | Compliant           |                                         |
| and Hygiene                            |                     |                                         |
|                                        |                     |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks          | Compliant           | bocumenting statement(3), if applicable |
| STOTILE TO LE INICAIS AND ONDORS       | Compilant           |                                         |
|                                        |                     |                                         |
|                                        |                     |                                         |
| Rule 5101:2-13-22 Fluid Milk           | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Wilk                | Compliant           |                                         |
|                                        |                     |                                         |
|                                        | 1                   |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling             | Compliant           |                                         |
|                                        |                     |                                         |
|                                        | 1                   |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care         | Compliant           |                                         |
|                                        |                     |                                         |
|                                        |                     |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering                 | Compliant           |                                         |
|                                        |                     |                                         |
|                                        |                     |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Responsibilities | Compliant           | 3 (" 11                                 |
|                                        |                     |                                         |
|                                        |                     |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-18 Group Size and Ratios     | Compliant           | g statement (e), in approach            |
| ·                                      |                     |                                         |
|                                        |                     |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13 Written Policies and         | Compliant           | bocumenting statement(s), if applicable |
| Procedures                             | 35                  |                                         |
|                                        |                     |                                         |
|                                        |                     |                                         |
| Rule 5101:2-13-12 Carbon Monoxide      | Status<br>Compliant | Documenting Statement(s), If applicable |
| Detectors - Type B Only                | Compliant           |                                         |
| Detectors Type B Offing                |                     |                                         |
|                                        |                     |                                         |
| Rule                                   | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space              | Compliant           |                                         |



| beginning.                 |           |                                         |
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|                            |           |                                         |
| Rule                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming   | Compliant |                                         |
|                            |           |                                         |
|                            |           |                                         |
|                            |           |                                         |
| Rule                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant |                                         |
| Equipment                  | ·         |                                         |
|                            |           |                                         |
|                            |           | <del></del>                             |
|                            |           |                                         |