# **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      |
| Precious Dreams Learning Center | 2180018089     | FCC - Type B Home |
| Address                         |                | County            |
| 3113 kentwood pl                |                | FRANKLIN          |
|                                 |                |                   |
| Columbus                        |                |                   |
| OH 43227                        |                |                   |

|                         | Inspection Information         |                  |                   |              |  |
|-------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type         | Inspection So                  | cope             | Inspection Notice |              |  |
| Compliance              | Full                           |                  | Unannounced       |              |  |
| Inspection Date         | Begin Time                     |                  | End Time          |              |  |
| 08/19/2022              | 9:50 AM                        |                  | 11:30 AM          |              |  |
| Reviewer:               |                                |                  |                   |              |  |
| Jamie Nunamaker-Dukuray |                                |                  |                   |              |  |
| Summary of Findings     |                                |                  |                   |              |  |
| No. Rules Verified      | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 68                      | 3                              | 0                | 0                 | 4            |  |

| Lic                       | 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             |   | 0          | 0         | 0     |  |
| Total Under 2 Years       | 3   | 1          | 0         | 1     |  |
| Older Toddler             |   | 0          | 0         | 0     |  |
| Preschool                 |   | 1          | 0         | 1     |  |
| School Age                |   | 0          | 0         | 0     |  |
| Total Capacity/Enrollment | 6   | 1          | 0         | 2     |  |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| Precious Dreams Learning Center              | Mixed Age Group | 1 to 1         |         |

## **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 |
|   |
|   |
|   |
|   |

# **Low Risk Non-Compliances**

# **Domain: 03 Postings & Equipment**

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the completed JFS 01201 "Dental First Aid" and implement as required by rule.

Findings: During the inspection, it was determined the current JFS 01201 "Dental First Aid" was not completed and posted. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/18/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Disaster Plan

Code: The program is required to have a completed written disaster plan.

Findings: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number 16 below:

#### Procedures:

- 1. The written disaster plan had not been completed
- 2. The plan was not provided to all child care staff and employees
- 3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
- 4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
- 5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
- 6. Outbreaks, epidemics or other infectious disease emergencies
- 7. Loss of power, water, or heat
- 8. Other threatening situations that may pose a health or safety hazard to the children in the program Details:
- 9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
- 10. Assisting infants and children with special needs and/or health conditions
- 11. Emergency contact information for parents and the program
- 12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
- 13. Procedures for communicating with parents during loss of communications, no phone or internet service available
- 14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
- 15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
- 16. Making the plan available to all child care staff members and employees
- 17. Training of staff or reassignment of staff duties as appropriate
- 18. Updating the plan on a yearly basis
- 19. Contact with local emergency management officials

Add the missing information to the disaster plan. Submit the program's corrective action plan, which includes the missing information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/18/2022



#### 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 2 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: 09/18/2022

#### 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 numbers 1, 8 and 9 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 was missing a record of immunizations the child has had specifying month, day and year
- 9. Medical was 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: 09/18/2022

## **Rules In-Compliance/Not Verified**

| Rule                              | Status    | Documenting Statement(s), If applicable |
|-----------------------------------|-----------|---|
| 5101:2-13-02 License Visible      | Compliant |   |
|                                   |           |   |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary  | Compliant |   |
| Closure                           |           |   |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location   | Compliant |   |
|                                   |           |   |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant |   |
|                                   |           |   |
|                                   |           |   |

| Rule                                  | Status    | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|---|
| 5101:2-13-02 Provider Medical         | Compliant | bocumenting statement(s), if applicable |
| 3101.2-13-02 Flovider Medical         | Compilant |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection               | Compliant | bocumenting statement(s), if applicable |
| Requirements                          | Compilant |   |
| Requirements                          |           |   |
|                                       | ı         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements    | Compliant | Documenting statement(s)) if applicable |
| for Type B Homes                      | Compilant |   |
| Tot Type B Homes                      |           |   |
|                                       | 1         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B   | Compliant | 3(e// spp                               |
| Homes                                 |           |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and            | Compliant | 0                                       |
| Combustible Materials in a Type B     |           |   |
| Home                                  |           |   |
| Home                                  |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B      | Compliant | Documenting statement(s), if applicable |
| • •                                   | Compilant |   |
| Home                                  |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records            | Compliant | bocumenting statement(s), if applicable |
| 3101.2-13-07 Staff Records            | Compilant |   |
|                                       |           |   |
|                                       | ı         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster | Compliant | 3(e// 5/p/                              |
| Parent                                |           |   |
| 1 3.3110                              |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements    | Compliant | 5 ( ),                                  |
| 2 = 2 = 2 = 2 =p.o/cc Nequilements    |           |   |
|                                       |           |   |
|                                       | •         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff         | Compliant | 3                                       |
| Requirements                          |           |   |
| 1.043.1.01.10                         |           |   |
|                                       |           |   |

| Rule   Status   Documenting Statement(s), If applicable  | Rule                           | Status    | Documenting Statement(s), If applicable   |
|--|--------------------------------|-----------|---|
| Rule   Status   Documenting Statement(s), If applicable  |                                |           | bocumenting statement(s), it applicable   |
| Rule   Status   Documenting Statement(s), if applicable  | J101.2-13-08 Whistle blower    | Compilant |   |
| Rule   Status   Documenting Statement(s), if applicable  |                                |           |   |
| Rule   |                                |           |   |
| Rule   | Bulo                           | Status    | Documenting Statement(s) If applicable  |
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| Rule   Status   Documenting Statement(s), If applicable  | 5101:2-13-09 Background Checks | Compliant |   |
| Rule   Status   Documenting Statement(s), If applicable  |                                |           |   |
| Rule   Status   Documenting Statement(s), If applicable  |                                |           |   |
| Rule   Status   Documenting Statement(s), If applicable  |                                |           |   |
| Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status  |                                |           | Documenting Statement(s), It applicable   |
| Status   Documenting Statement(s), if applicable   | 5101:2-13-10 Health Training   | Compliant |   |
| Status   Documenting Statement(s), if applicable   |                                |           |   |
| Status   Documenting Statement(s), if applicable   |                                |           |   |
| Status   Documenting Statement(s), if applicable   |                                |           |   |
| Rule   Status   Documenting Statement(s), If applicable  |                                |           | Documenting Statement(s), If applicable   |
| Rule     Status     Documenting Statement(s), If applicable       5101:2-13-11 Outdoor Space     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-11 Outdoor Equipment     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-11 Fall Zone     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-12 Safe Equipment     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-12 Safe Environment     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-13 Clean environment and equipment     Compliant  | 5101:2-13-10 Professional      | Compliant |   |
| Rule       Status       Documenting Statement(s), If applicable         5101:2-13-11 Outdoor Equipment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-11 Fall Zone       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-12 Safe Equipment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-12 Safe Environment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-13 Clean environment and equipment       Compliant   | Development                    |           |   |
| Rule       Status       Documenting Statement(s), If applicable         5101:2-13-11 Outdoor Equipment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-11 Fall Zone       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-12 Safe Equipment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-12 Safe Environment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-13 Clean environment and equipment       Compliant   |                                |           |   |
| Rule       Status       Documenting Statement(s), If applicable         5101:2-13-11 Outdoor Equipment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-11 Fall Zone       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-12 Safe Equipment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-12 Safe Environment       Compliant         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-13 Clean environment and equipment       Compliant   |                                |           |   |
| Rule     Status     Documenting Statement(s), If applicable       5101:2-13-11 Outdoor Equipment     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-11 Fall Zone     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-12 Safe Equipment     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-12 Safe Environment     Compliant       Rule     Status     Documenting Statement(s), If applicable       5101:2-13-13 Clean environment and equipment     Compliant   | Rule                           | Status    | Documenting Statement(s), If applicable   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  Rule Status Documenting Statement(s), If applicable  Status Compliant  Compliant  | 5101:2-13-11 Outdoor Space     | Compliant |   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  Rule Status Documenting Statement(s), If applicable  Status Compliant  Compliant  | ·                              | ·         |   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  Rule Status Documenting Statement(s), If applicable  Status Compliant  Compliant  |                                |           |   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  Rule Status Documenting Statement(s), If applicable  Status Compliant  Compliant  |                                |           | •   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  Rule Status Documenting Statement(s), If applicable  Status Compliant  Compliant  | Rule                           | Status    | Documenting Statement(s), If applicable   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  Compliant  Status Documenting Statement(s), If applicable  Status Compliant   | 5101:2-13-11 Outdoor Equipment | Compliant | 5 (" 11   |
| Rule Status Documenting Statement(s), If applicable  |                                |           |   |
| Rule Status Documenting Statement(s), If applicable  |                                |           |   |
| Rule Status Documenting Statement(s), If applicable  |                                | 1         |   |
| Rule Status Documenting Statement(s), If applicable  | Rule                           | Status    | Documenting Statement(s). If applicable   |
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| Rule  Status  Documenting Statement(s), If applicable  5101:2-13-12 Safe Environment  Compliant  Rule  Status  Documenting Statement(s), If applicable  5101:2-13-12 Safe Environment  Compliant  Documenting Statement(s), If applicable  5101:2-13-13 Clean environment and equipment  |                                |           |   |
| Rule  Status  Documenting Statement(s), If applicable  5101:2-13-12 Safe Environment  Compliant  Rule  Status  Documenting Statement(s), If applicable  5101:2-13-12 Safe Environment  Compliant  Documenting Statement(s), If applicable  5101:2-13-13 Clean environment and equipment  |                                |           |   |
| Rule  Status  Documenting Statement(s), If applicable  5101:2-13-12 Safe Environment  Compliant  Rule  Status  Documenting Statement(s), If applicable  5101:2-13-12 Safe Environment  Compliant  Documenting Statement(s), If applicable  5101:2-13-13 Clean environment and equipment  | Rule                           | Status    | Documenting Statement(s) If applicable  |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-12 Safe Environment Compliant  Rule Status Documenting Statement(s), If applicable 5101:2-13-13 Clean environment and equipment Compliant  |                                |           | bocamenting statement(3), if applicable   |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-13 Clean environment and equipment  Status Compliant   | Jioi.2-13-12 Sale Equipment    | Compliant |   |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-13 Clean environment and equipment  Status Compliant   |                                |           |   |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-13 Clean environment and equipment  Status Compliant   |                                | 1         |   |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-13 Clean environment and equipment  Status Compliant   | Pulo                           | Status    | Documenting Statement/s) If applicable  |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-13 Clean environment and equipment Compliant   |                                |           | bocumenting statement(s), if applicable   |
| 5101:2-13-13 Clean environment and equipment Compliant   | 2101:7-13-17 2916 FUALCOUMENT  | Compliant |   |
| 5101:2-13-13 Clean environment and equipment Compliant   |                                |           |   |
| 5101:2-13-13 Clean environment and equipment Compliant   |                                |           |   |
| 5101:2-13-13 Clean environment and equipment Compliant   | Dula                           | Chahara   | December 6th 1/2 is 11  |
| equipment  |                                |           | Documenting Statement(s), If applicable   |
|  |                                | Compliant |   |
| Rule Status Documenting Statement(s) If applicable   | equipment                      |           |   |
| Rule Status Documenting Statement(s) If applicable   |                                |           |   |
| Rule   Status   Documenting Statement(s) If applicable   |                                |           |   |
| - Social States   Social Entities Statement (3), it applicable   | Rule                           | Status    | Documenting Statement(s), If applicable   |

| 5101:2-13-13 Handwashing                              | Compliant           |   |
|---|---------------------|---|
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free                               | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing                            | Compliant           | bodinenting statement(s), ii applicable |
|   |                     |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field and Routine Trips | Compliant           |   |
| <u>'</u>  |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision                    | Compliant           |   |
| for Field and Routine Trips                           |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements                      | Compliant           | bocumenting statement(s), ii applicable |
| ·   |                     |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections                      | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements                     | Compliant           |   |
|   |                     |   |
|   |                     |   |
| Rule 5101:2-13-15 Health Conditions                   | Status Compliant    | Documenting Statement(s), If applicable |
| 3101.2 13 13 Health Conditions                        | Compilant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Records Retention                  | Compliant           |   |
| and Confidentiality                                   |                     |   |
| Dula  | Chahua              | December Chalance (IV) If any Park I    |
| Rule 5101:2-13-16 Emergency Drills                    | Status<br>Compliant | Documenting Statement(s), If applicable |
| 2101.2-10 Emergency Drills                            | Соптриант           |   |

|                                     | <u> </u>  |  |
|-------------------------------------|-----------|--|
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-16 First Aid Kit/Standard | Compliant | Documenting Statement(3), ii applicable  |
| Precautions                         | Compilant |  |
| Frecautions                         |           |  |
|                                     | 1         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-16 Communicable Diseases  | Compliant | (-),                                     |
|                                     |           |  |
|                                     |           |  |
|                                     |           | ·  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-16 Incident/Injury        | Compliant | -  |
|                                     | ·         |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-18 Attendance             | Compliant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-19 Supervision            | Compliant |  |
|                                     |           |  |
|                                     |           |  |
|                                     | 1         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-19 School Age Supervision | Compliant |  |
|                                     |           |  |
|                                     |           |  |
| 0.1                                 |           | D :: C:                                  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-19 Child Guidance         | Compliant |  |
|                                     |           |  |
|                                     | 1         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
|                                     |           | bocumenting statement(s), if applicable  |
| 5101:2-13-20 Sleep and Nap          | Compliant |  |
| Requirements                        |           |  |
|                                     | 1         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-20 Crib and Playpen       | Compliant | bookinenting statement(s), it applicable |
| Requirements                        |           |  |
| Requirements                        |           |  |
|                                     | 1         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-21 Evening and Overnight  | Compliant |  |
| Care                                |           |  |
| Carc                                |           |  |

| Dedition Date                          |           |   |
|--|-----------|---|
|  |           |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
|  |           | bocumenting statement(3), it 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 |   |
| J101.2-13-22 Medis and Shacks          | Compliant |   |
|  |           |   |
|  |           |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk                | Compliant |   |
| 310112 13 22 11010 111111              |           |   |
|  |           |   |
|  |           |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling             | Compliant |   |
|  | '         |   |
|  |           |   |
|  |           |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care         | Compliant |   |
|  |           |   |
|  |           |   |
|  |           |   |
| Rule                                   | Ctatus    | Decumenting Statement(s) If applicable  |
|  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food    | Compliant |   |
| Preparation                            |           |   |
|  |           |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
|  |           | bocamenting statement(s), it applicable |
| 5101:2-13-23 Diapering                 | Compliant |   |
|  |           |   |
|  |           |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for     | Compliant | 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
|  | Compliant |   |
| Swimming                               |           |   |
|  | <u> </u>  |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication                | Compliant |   |
|  |           |   |
| Requirements                           |           |   |
|  |           |   |
|  |           |   |
| Rule                                   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Responsibilities | Compliant |   |
|  |           |   |
|  |           |   |
| Î .                                    |           |   |

| Rule                                    | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| 5101:2-13-18 Group Size and Ratios      | Compliant | S  |
| '                                       | '         |  |
|   |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13 Written Policies and          | Compliant |  |
| Procedures                              |           |  |
|   |           |  |
|   | 1.        |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-12 Carbon Monoxide            | Compliant |  |
| Detectors - Type B Only                 |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-11 Indoor Space               | Compliant | bocumenting statement(s), if applicable  |
| 3101.2-13-11 Illu001 Space              | Compilant |  |
|   |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-17 Programming                | Compliant | - comment of the control of the cont |
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| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-24 On-site Pools              | Compliant |  |
|   |           |  |
|   |           |  |
|   | 1         |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-12 Pets                       | Compliant |  |
|   |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-24 Swimming Sites             | Compliant | bocamenting statement(s), it applicable  |
| 3101.2 13 24 3Williaming Sites          | Compliant |  |
|   |           |  |
|   | •         |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-17 Materials and              | Compliant |  |
| Equipment                               |           |  |
|   |           |  |
|   |           |  |
|   |           |  |