

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 http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details | | |
|------------------------|----------------|-------------------|
| Program Name | Program Number | Program Type |
| Mama Bear In Home Care | 2200023191 | FCC - Type B Home |
| Address | | County |
| 2252 Meridian Ct | | FRANKLIN |
| | | |
| Columbus | | |
| OH 43232 | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | соре | Inspection Notice | |
| Provisional | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 08/12/2021 | 11:00 AM | | 12:40 PM | |
| Reviewer: | | | | |
| Meia Wright | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 78 | 11 | 0 | 1 | 12 |

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

| Staff-Child Ratios at the Time of Inspection | | | |
|----------------------------------------------|-----------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Mama Bear In Home Care | Mixed Age Group | 1 to 6 | |



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

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: The program is required to have background checks for all staff and residents over 18 years of age.

Findings: In review of staff records, it was determined that background checks were not requested for the person listed on the Employee Record Chart as noted in number 1 below:

1. Submitting the request for a background check for child care in the OPR;

2. Submitting fingerprints electronically according to the process established by the BCI.

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

Corrective Action Plan Due: 09/12/2021

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment



Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have all outlets and surge protectors covered.

Findings: During the inspection, it was determined that an outlet in the kitchen did not have a childproof receptacle cover. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/12/2021

Domain: 05 Health & Safety

Rule: 5101:2-13-16 First Aid Kit

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit onsite as required, that included all items listed in the appendix A of the rule. The kit was missing the item listed in number 11 below:

- 1. One roll of hypoallergenic first-aid tape;
- 2. Individually wrapped sterile gauze

squares in assorted sizes;

- 3. Sterile adhesive bandages in assorted sizes;
- 4.Tweezers;
- 5. Gauze rolled bandage;
- 6. Triangular bandage;
- 7. Rounded end scissors;

8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);

- 9. A working digital thermometer;
- 10. Disposable non-latex gloves;
- 11. A working flashlight;

12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;

13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;

14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;

15. Soap or waterless sanitizer (field trip or transporting away from the program only);

16. Bottled water (field trip or transporting away from the program only).

Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/12/2021



Domain: 05 Health & Safety

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Requirements Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item numbers 1,2 & 3 below:

- 1. Monthly fire drills
- 2. Monthly weather emergency drills (March through September)
- 3. Quarterly emergency/lockdown drills.

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

Corrective Action Plan Due: 09/12/2021

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Fluid Milk

Code: The program is required to have written documentation from a licensed physician if child is to be served something other than the required fluid milk.

Findings: During the inspection, it was determined that milk other than one per cent or skim cow's milk that is Vitamin A and D fortified was served to children older than twenty-four months of age. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/12/2021

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 7 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. Training of staff or reassignment of staff duties as appropriate
- 17. Updating the plan on a yearly basis

18. 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: 09/12/2021

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips Code: The program is required to obtain a completed written parental permission before conducting a field or routine trip..

Findings: In review of the program's records, it was determined that the form used to secure the written permission of the parent for a field trip or routine trip was missing the required information listed in number 7 below:

- 1. Child's name;
- 2. Date of the trip (field trips only);
- 3. Destination of the trip;
- 4. Departure and return time of the trip (field trips only);
- 5. Signature of the parent/guardian;
- 6. Date on which the permission was signed;
- 7. Statement notifying parents how their child will be transported;
- 8. Other [].

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

Corrective Action Plan Due: 09/12/2021



Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips Code: The program is required to have written parental permission for trips on file.

Findings: During the inspection, it was determined that written parental permission was not secured routine trips off the premises or out of the areas approved for child care, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/12/2021

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Requirements

Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" on file for each child in care.

Findings: During the inspection, it was determined the provider did not have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/12/2021

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Requirements

Code: The provider is required to maintain current employee and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records were not entered or updated within five calendar days of the change in the Ohio Professional Registry (OPR) as noted in number 3 below:

1. At least one employee or child care staff member (including substitutes) had not created an employment record in the OPR for the program.

2. At least one resident had not created an employment record in the OPR for the family child care provider within five days of becoming a resident or turning eighteen.

3. The provider had not assigned at least one employee, child care staff member (including substitutes), or resident to the program's organization dashboard.

4. At least one individual's schedule was not current.

5. At least one individual's position or role was not current.

6. At least one individual's employment or residence had not been end dated.

7 .Other: []



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

Corrective Action Plan Due: 09/12/2021

Domain: 08 Staff Files

Rule: 5101:2-13-10 Health Training B

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for trainings listed in numbers 5 & 14 below:

- 1. First Aid expired training
- 2. First Aid not taken First Aid training
- 3. First Aid not have verification of completion of First Aid
- 4. First Aid Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 5. CPR expired training
- 6. CPR not taken CPR training
- 7. CPR not have verification of CPR training
- 8. CPR training taken did not include all age groups the program serves

9. CPR - Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.

10. Management of Communicable Disease - expired training

- 11. Management of Communicable Disease not taken CD training
- 12. Managment of Communicable Disease not have verification of completion of the full CD training

13. Management of Communicable Disease - Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.

- 14. Child Abuse Recognition and Prevention expired training
- 15. Child Abuse Recognition and Prevention not taken Child Abuse six-hour training

16. Child Abuse Recognition and Prevention - Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/12/2021

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child's Medical

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 1 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. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care

6. 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

7. Medical(s) were missing a record of immunizations the child has had specifying month, day and year

8. 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

9. 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

10. Other []

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

Corrective Action Plan Due: 09/12/2021

Domain: 09 Children's Files

Rule: 5101:2-13-15 JFS 01234 'Child Enrollment and Health Information'

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 or guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 3,7,12 & 14 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 parent information
- 4. Complete emergency contact information
- 5. Complete physician information
- 6. Information regarding the parent list
- 7. Health information
- 8. Additional information for all boxes checked "yes"
- 9. Emergency transportation information
- 10. Parent/guardian's signature
- 11. Diapering Statement
- 12. Acknowledgement of Policies and Procedures
- 13. Enrollment form for at least one child was not updated by either the parent or the administrator



Department of Education Department of Job and Family Services

14. Enrollment form for at least one child was not signed by the administrator

15. Other []

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

Corrective Action Plan Due: 09/12/2021

Rules In-Compliance/Not Verified

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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 License Posted | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Ratio and Group Size | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Ratio and Group Size | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Requirements | Compliant | |
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| 5101:2-13-20 Sleep and Napping | Compliant | |
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| Requirements for a Licensed Family | | |
| Child Care Provider | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Standard Precautions | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Review Policies and | Compliant | bocumenting statement(s), it applicable |
| | compliant | |
| Procedures | | |
| Procedures | | |
| Procedures | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule 5101:2-13-02 Voluntary Temporary | Status Compliant | Documenting Statement(s), If applicable |
| Rule | | Documenting Statement(s), If applicable |
| Rule 5101:2-13-02 Voluntary Temporary | | Documenting Statement(s), If applicable |
| Rule 5101:2-13-02 Voluntary Temporary Closure | Compliant | |
| Rule 5101:2-13-02 Voluntary Temporary Closure Rule | Compliant Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-13-02 Voluntary Temporary Closure Rule 5101:2-13-20 Crib and Playpen | Compliant | |
| Rule 5101:2-13-02 Voluntary Temporary Closure Rule | Compliant Status | |
| Rule 5101:2-13-02 Voluntary Temporary Closure Rule 5101:2-13-20 Crib and Playpen | Compliant Status | |
| Rule 5101:2-13-02 Voluntary Temporary Closure Rule 5101:2-13-20 Crib and Playpen | Compliant Status | Documenting Statement(s), If applicable |
| Rule 5101:2-13-02 Voluntary Temporary Closure Rule 5101:2-13-20 Crib and Playpen Requirements | Compliant Status Compliant | |
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| Rule 5101:2-13-02 Voluntary Temporary Closure Rule 5101:2-13-20 Crib and Playpen Requirements Rule 5101:2-13-14 Vehicle Requirements | Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-13-02 Voluntary Temporary Closure Rule 5101:2-13-20 Crib and Playpen Requirements Rule 5101:2-13-14 Vehicle Requirements Rule Rule | Compliant Status Compliant Status Compliant Status | Documenting Statement(s), If applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-16 Incident/Injury | Compliant | |
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| Rule | Status | Desumenting Statement(s) If applicable |
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| 5101:2-13-23 Diapering | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | |
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| Rule | Status | Decumenting Statement(s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | Compliant | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision | Compliant | |
| for Field and Routine Trips | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and | Compliant | |
| | Compilant | |
| General Emergency Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-25 Medication Storage | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster | Compliant | |
| Parent | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant | |
| Equipment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean Environment and | Compliant | |
| Equipment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment | Compliant | |
| and Hygiene | | |
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| 5101:2-13-25 Medication Requirements | Compliant | |
|--------------------------------------------------------|---------------------|-----------------------------------------|
| Rule 5101:2-13-02 Information in Provider Portal | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-08 Whistle Blower | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-16 Serious Incident | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-10 Professional Development | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-20 Use of Crib and Playpen | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-22 Meals and Snacks | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-08 Substitute Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-08 Substitute Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-15 Health Conditions | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-02 Information in OCLQS | Status Compliant | Documenting Statement(s), If applicable |



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|-----------------------------------------|-----------|-----------------------------------------|
| 101:2-13-11 Outdoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | |
| | compliant | |
| 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 |
| 5101:2-13-09 Background Checks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection Requirements | Compliant | |
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