



Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <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 IMAGINATIONS AT WORK	Program Number 000000200795	Program Type Child Care Center	
Address 993 BELVEDERE DRIVE LEBANON OH 45036		County WARREN	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 10/14/2022	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 01/11/2023	Begin Time 8:10 AM	End Time 12:30 PM
Reviewer: NANCY SCHMITT		

Summary of Findings				
No. Rules Verified 56	No. Rules with Non-compliances 18	No. Serious Risk 0	No. Moderate Risk 5	No. Low Risk 16

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)		16	0	16
Young Toddler		0	0	0
Total Under 2 ½ Years	28	16	0	16
Older Toddler		25	0	25
Preschool		39	0	39
School Age		12	32	44
Total Capacity/Enrollment		132	76	32

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



Infant 1	0 to < 12 months	3 to 10	#1
Infant 1	0 to < 12 months	3 to 10	#2
Infant 2	12 months to < 18 months	2 to 5	#1
Infant 2	0 to < 12 months	2 to 5	#2
Toddler	18 months to < 30 months	3 to 15	#1
Toddler	18 months to < 30 months	3 to 14	#2
Early Preschool	30 months to < 36 months	3 to 15	#1
Early Preschool	30 months to < 36 months	3 to 15	#2
Preschool	3 years to < 4 years	2 to 13	#1
Preschool	3 years to < 4 years	2 to 14	#2
PreK	4 years to < 5 years	2 to 15	#1
PreK	4 years to < 5 years	1 to 4	#2 Classroom
PreK	4 years to < 5 years	1 to 12	#2 Playground
School Age	School-Age to < 11 years	2 to 27	#1
School Age	School-Age to < 11 years	1 to 12	#2

Summary of Non-Compliances

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

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to refrain from using space heaters unless it has been approved by a fire official.

Finding: During the inspection, it was determined that space heaters which had not been approved by a fire official were in use in the area identified in numbers 1 & 2 below:



1. The administrator's office.
2. A classroom.
3. The break room.
4. Several classrooms.
5. The hallway.
6. The entry way.
7. Other [].

The use of this space heater must be discontinued until approval for its use has been obtained. Submit the program's corrective action plan, which includes written fire approval for use of this space heater or a written statement that the space heater is no longer being used at the program, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals and machinery in a place that is inaccessible to children. The program is required to provide an outdoor play area away from machinery in operation.

Finding: During the inspection, a potentially hazardous item or toxic substance was stored in the restroom by the toilet in the Toddler Room where children had access to it, as noted in number 2 below.

1. Bleach.
2. Cleaning agent.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.
6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.
14. Other potentially hazardous substance, equipment or machinery: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required.

Finding: In review of the staff records, it was determined that a background check was not requested for the person listed on the Employee Record Chart as noted in numbers 1 & 2 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 BCI.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to receive a preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: During the inspection, it was determined that an individual had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file as required. Submit the program's corrective action plan, which includes a statement that the approval is now on file or the individual(s) are no longer engaged in assigned duties and are not near children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans



Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number 25 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023



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Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

Finding: During the inspection, it was determined that the attendance records did not include the required information listed in number 1 below:

1. The name of the child (one child in the School Age Room was in attendance but was not listed on the attendance record).
2. The birth date of the child.
3. The assigned group.
4. The child's weekly schedule.
5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 02/10/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

Code: The program is required to maintain the appropriate group size for each group of children served.

Finding: During the inspection, group size limitations were not maintained for the group of toddlers as it was determined there were 15 children grouped together. The group size shall not exceed twice the maximum number of children allowed per Child Care Staff Member. The maximum group size for this group was 14. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023



Domain: 02 Safe & Sanitary Environment

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

Code: The program is required to provide a clean and healthy environment.

Finding: During the inspection, it was determined that the following unsanitary conditions were at the program: water from the handwashing sink in the Infant 1 Room was being used to prepare bottles & the changing table pads in the Toddler & Early Preschool Rooms were torn. A clean and healthy environment must be provided. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following items or conditions which may threaten their health, safety, or well-being as noted in number 12 below:

1. Open pull cords that are not closed loop.
2. Telephone cords.
3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
4. Stacked chairs.
5. Employee(s) purse(s).
6. Diaper bags.
7. Television not securely anchored.
8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
9. Smoke detector needing batteries replaced.
10. Staff member stepped over a barrier/gate while holding a child.
11. Emergency exits were blocked by the following classroom furniture: [].
12. Other: a candle warmer was accessible to children on the counter in the School Age Room & a hot space heater was accessible to the children in the School Age Room on a shelf by where the children were lined up to go to the bus stop.

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 02/10/2023

Domain: 03 Postings & Equipment

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

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

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

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

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

Corrective Action Plan Due: 02/10/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to have an outdoor play space free from general hazards.

Finding: During the inspection, it was determined that a hazardous condition existed in the outdoor play area, as noted in number 10 below:

1. There was broken glass.



2. There were tall weeds.
 3. There was poison ivy.
 4. There were tree branches.
 5. There was mold visible.
 6. There were thistles with pricklers.
 7. There were bird droppings.
 8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
 9. The sandbox was contaminated.
 10. Other: a large section of the playground fence was broken and had been secured until the fence can be repaired. Sharp ends of several screws and sharp pieces of broken plastic were accessible to children.
- Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Management of Communicable Disease

Code: The program is required to post the JFS 08087 "Ohio Communicable Disease Chart".

Finding: During the inspection, it was determined that the JFS 08087 "Ohio Communicable Disease Chart" was not posted as required, as indicated in number 3 below:

1. The chart was not posted.
2. In a location readily available to program staff and parents.
3. The posted chart was not the current version (not updated to the 2021 version). A 2022 version of the chart was given to the administrator during this inspection.
4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Diapering and Toilet Training

Code: The program staff is required to have adequate supplies for diapering available.



Finding: During the inspection, it was determined the required supplies were not used for a diaper change (change of soiled underwear) as noted in number 1 below:

1. There was no disposable separation material;
2. There was no germicidal solution for sanitizing;
3. There were no plastic containers or bags for the storage of soiled clothing;
4. Other [].

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

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program or in the Ohio Professional Registry.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry for Child Care Staff Members listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

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

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 2, 4, 5, 6 & 7 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.



3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: []

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

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employees listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

Finding: In review of the staff records, it was determined that the medical statement for the employee listed on the Employee Record Chart did not include the required information listed below in number 4.

1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that the employee is:
 - a. Physically fit for employment in a program caring for children;



- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test
 - a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
 - b. Results of a TB test for employees meeting both criteria in 4a;
 - c. Results of additional testing for employees with a positive TB test;
 - d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

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

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training.

Finding: In review of the staff records, it was determined that child care staff members had not completed the online orientation training as noted in number 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-10 Professional Development Requirements

Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.



Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
6. Other [].

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

Corrective Action Plan Due: 02/10/2023

Domain: 08 Staff Files

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

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

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in numbers 1, 2, 3, 5 & 6 below:

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

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

Corrective Action Plan Due: 02/10/2023



Domain: 09 Children's Files

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

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

Finding: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 2, 10 & 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 child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other []

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

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
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5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Currently the program is providing breakfast & snacks. Lunch is catered.
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The off-site food processing establishment's current Ohio Department of Agriculture registration information was observed during the inspection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program Policies and Procedures	Not Verified	Documenting Statement: During the inspection, the requirements of the rule regarding the program's written policies and procedures were discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: The program does not transport children. To & from school - public school bus.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster Plan	Not Verified	Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule: 5101:2-12-17 Daily Outdoor Play	Compliant	
Rule: 5101:2-12-18 License Capacity	Compliant	
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
Rule: 5101:2-12-19 Supervision	Compliant	
Rule: 5101:2-12-19 Child Guidance	Compliant	
Rule: 5101:2-12-20 Cots and Napping	Compliant	
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were placed 2 feet apart.
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier.
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were labeled with the assigned infant's name.
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Daily Care	Compliant	Documenting Statement: An appropriate program of activities with infants was observed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: All bottles were labeled as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	