

# **Center Licensing Inspection Full Report**

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

	Program Deta	ils	
Program Name KINDERCARE LEARNING CENTER #1561	Program Number 000000204852		Program Type Child Care Center
	000000201032		
Address 11737 SEVEN GABLES RD SYMMES TOWNSHI OH 45249	Р		County HAMILTON
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 05/15/2019	Food Service Risk Lo	evel	,

	Insp	ection Information		
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 11/15/2022	Begin Time 9	:00 AM	End Time 12:30 PM	
Reviewer:				
Nicole Vadnais				
	Sur	mmary of Findings		
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
56	17	0	0	19

Li	cense Capacity ar	nd Enrollme	ent at the Time of In	spection
Age Group	License Capacity		Enr	rollment
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		21	0	21
Young Toddler		13	0	13
Total Under 2 ½ Years	62	34	0	34
Older Toddler		5	0	5
Preschool		29	0	29
School Age		12	0	12
Total Capacity/Enrollment	162	46	0	80

S	taff-Child Ratios at the Time of Ins	pection	
Group	Age Group/Range	Ratio Observed	Comment

Infant B	0 to < 12 months	3 to 8	#1
Infant B	0 to < 12 months	2 to 8	#2
Infant C	12 months to < 18 months	1 to 3	#1
Infant C	12 months to < 18 months	1 to 6	#2
Toddlers	18 months to < 30 months	3 to 15	#1
Toddlers	18 months to < 30 months	3 to 14	#2
Preschool	3 years to < 4 years	1 to 9	#1
Preschool	3 years to < 4 years	1 to 10	#2
PreK	4 years to < 5 years	1 to 10	#1
PreK	4 years to < 5 years	2 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	
No Moderate Risk Non-Compliances were observed during this inspection	
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### **Low Risk Non-Compliances**

**Domain: 00 License & Approvals** 

Rule: 5101:2-12-03 Inspection Requirements

<u>Code</u>: The program is required to respond to noncompliances by the date noted in the inspection report.

<u>Finding</u>: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 4/15/22. The rule requires the program to complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/17/2022

## **Domain: 00 License & Approvals**

Rule: 5101:2-12-03 Inspection Requirements

<u>Code</u>: The program staff is required to provide true and accurate information.

<u>Finding</u>: During the inspection, it was determined that the program provided false information, in that a falsified education and medical and educational documents were provided. The rule requires the program to provide accurate and truthful information to the Department. 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: 12/17/2022

Domain: 00 License & Approvals

Rule: 5101:2-12-04 Building Department Inspection

<u>Code</u>: The program is required to maintain a copy of the certificate of occupancy on file at the center for review.

<u>Finding</u>: During the inspection, it was determined the program did not have a copy of the certificate of occupancy available on-site for review. Submit the program's corrective action plan, which includes a copy of the certificate of occupancy, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/17/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

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

<u>Finding</u>: 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. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/17/2022

#### Domain: 02 Safe & Sanitary Environment

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

<u>Code</u>: The program is required to provide a clean restroom with the appropriate materials available.

<u>Finding</u>: During the inspection, it was determined that unsanitary conditions, as noted in numbers 5 and 6 below, were in the preschool restroom:

- 1. There was no liquid soap.
- 2. There was no toilet paper.
- 3. There were no paper towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.
- 6. The toilet(s) were not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.
- 9. Other [ ].

The restroom(s) must be kept sanitary at all times. 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

<u>Code</u>: 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.

<u>Finding</u>: 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 item(s) or condition(s) which may threaten their health, safety, or well-being as noted in numbers 4 and 12 below:

- 1. Open pull cords that are not closed loop.
- 2. Telephone cords.
- 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: mop closet accessible.

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: 12/17/2022

#### **Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use straps on equipment that is manufactured with straps.

<u>Finding</u>: During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number 4 below:

- 1. The straps were missing on the [ ].
- 2. The straps were attached, but were not used on the [ ].
- 3. The straps were attached and were used, but were not used in a safe manner.
- 4. Manufacturer's guidelines for the tricycles were not followed in that pedals were missing.

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

Corrective Action Plan Due: 12/17/2022

### **Domain: 03 Postings & Equipment**

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

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

<u>Finding</u>: 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.
- 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: 12/17/2022

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills

appropriately.

<u>Finding</u>: During the inspection, it was determined that the required drills were not completed for item numbers 2 and 3 below:

- 1. Monthly fire drills.
- 2. Monthly weather emergency drills (March through September).
- 3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 12/17/2022

#### **Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

<u>Code</u>: The program is required to have staff trained in CPR, First Aid, and Communicable Diseases on all trips.

<u>Finding</u>: During the inspection, it was determined that a person trained in cardiopulmonary resuscitation (CPR), first aid and management of communicable disease, had not been present for number 1 below as required by the rule:

- 1. In the vehicle for routine trips;
- 2. In the vehicle for field trips;
- 3. At the destination on all field trips.

Secure current training for the area needed or restructure the staff who are currently trained on the vehicle during routine trips and field trips. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/17/2022

**Domain: 07 Diapering & Infant Care** 

Rule: 5101:2-12-20 Cribs

Code: The program is required to provide a safe and sufficient barrier to separate the play and sleeping space.

<u>Finding</u>: During the inspection, it was determined that the barrier between the play and sleeping space did not meet the requirements as noted in number 1 below:

- 1. No barrier had been provided
- 2. The barrier did not prevent the infants from entering the sleeping area.
- 3. The barrier was not safe.
- 4. The barrier was not sturdy.
- 5. The barrier impaired staff's ability to see and hear all sleeping infants in their cribs.
- 6. The barrier was inadequate.
- 7. 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.

#### **Domain: 08 Staff Files**

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

<u>Code</u>: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

<u>Finding</u>: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number 3 below:

- 1. The JFS 01176 Program Notification of Background Check Review for Child Care the program received from the Department was not on file and the individual was not left alone with children.
- 2. The JFS 01177 Individual Notification of Background Check Review for Child Care was on file instead of the JFS 01176.
- 3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/17/2022

**Domain: 08 Staff Files** 

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

<u>Code</u>: The program is required to have staff complete the online staff orientation training.

<u>Finding</u>: In review of the staff records, it was determined that child care staff member(s) 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: 12/17/2022

## Domain: 08 Staff Files

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

<u>Code</u>: The program staff is required to have educational verification on file at the program or in the Ohio

Professional Registry.

<u>Finding</u>: 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 Member(s) 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: 12/17/2022

#### **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.

<u>Finding</u>: In review of the staff records, it was determined a completed medical examination statement for the employee(s) 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: 12/17/2022



#### Domain: 08 Staff Files

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

<u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional

Registry.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 3, 4, 5, 6, and 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: 12/17/2022

#### Domain: 08 Staff Files

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

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

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in numbers 1, 2, and 4 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: 12/17/2022

#### 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".

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 2, 4, 6, 7, 10, and 12 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.

**Domain: 09 Children's Files** 

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

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

<u>Finding</u>: In review of 25% 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 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(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases
- required by division 5104.014 of the Revised Code and found in appendix A to this rule
- 10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of

conscience, including religious convictions

11. Other [ ]

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

Corrective Action Plan Due: 12/17/2022

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.
	1.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	Boodineming ottatement(a), it applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Administrator Qualifications	Compliant	Documenting Statement: During the inspection, the requirements of the rule
Qualifications		regarding administrator qualifications
		were discussed.
		were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program	Not Verified	Documenting Statement: During the
Policies and Procedures		inspection, the requirements of the rule
		regarding the program's written policies
		and procedures were discussed.
Dulo	Ctatus	Decumenting Statements) If applicable
Rule: 5101:2-12-10 Professional	Status Compliant	Documenting Statement(s), If applicable  Documenting Statement: During the
Development Requirements	Compilant	inspection, the requirements of the rule
Development Requirements		regarding professional development
		training for administrators and child care
		staff members were discussed.
		Staff fileffibers were discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children	Compliant	3
Under 2 1/2 Years		

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space	Compliant	Documenting Statement: The quarterly
Requirements		playground inspections were completed
		and documented, as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall	Compliant	Documenting Statement: The protective
Zones	Compilation	material used under outdoor equipment
201163		was mulch and rubber flooring.
		was maisir and rasser neering.
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Smoke Free	Compliant	Documenting Statement: A notice was
Environment		observed posted stating that smoking is
		prohibited at the program.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation -	Compliant	Documenting Statement: The driver(s)
Driver Requirements	Compilation	had completed the required ODJFS driver
briver requirements		training.
		truming.
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation - Vehicle	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: At the time of
Care Plans		the inspection, there were no children
		currently enrolled who had health
		conditions.
Pulo: E101:2-12-15 Modical/Physical	Compliant	Documenting Statements During the
Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: During the
Care Pidiis		inspection, the requirements of the rule
		regarding caring for children with a
		specific health condition were discussed.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 First Aid/Standard	Compliant	Documenting Statement: During the
Precautions		inspection, the program had complete
		first aid kits available as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Management of	Compliant	Documenting Statement: The JFS 08087
Communicable Disease		"Communicable Disease Chart" was
		posted and was readily available to staff
		and parents.
Rule: 5101:2-12-16 Management of	Compliant	Documenting Statement: During the
Communicable Disease	Compilant	inspection, documentation required by
Communicable Disease		rule and strategies to maintain
		compliance were discussed with program
		staff. The following resources were
		provided: MPL159
		F - 255
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster	Not Verified	Documenting Statement: During the
Plan	Not vermed	inspection, the requirements of the rule
rian		regarding the written disaster plan were
		discussed.
		discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	2000 The Table Transport of the Table Transpo
Equipment		
de la	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
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Rule 5101:2-12-18 License Capacity	Status Compliant	Documenting Statement(s), If applicable
5101.2-12-10 License Capacity	Compilant	

Rule: 5101:2-12-18 Ratio	Compliant	Degumenting Statement, Staff/shild
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Attendance	Compliant	Documenting Statement: During the
Records		inspection, attendance records were
		reviewed. Child Care Staff Members were
		viewed recording the attendance for each
		child upon arrival and departure. All
		attendance records met the requirements
		of the rule and were kept with the group
		at all times.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Chatus	Decumenting Statement(s) If applicable
	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-22 Meal and Snack	Compliant	Documenting Statement: During the
Requirements	Compilant	inspection, the requirements of the rule
Requirements		regarding meals and snacks were
		discussed.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
	, -	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
<u> </u>	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	3 -1(-1)
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Dulo	Ctatus	Decumenting Statement/s\ If applicable
Rule	Status	Documenting Statement(s), If applicable



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Documenting Statement(s), If applicable
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