

## **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 Details  |                         |                 |                    |  |  |
|--|-------------------------|-----------------|--------------------|--|--|
| Program Name   | Program Number          |                 | Program Type       |  |  |
| KINDERCARE LEARNING CENTER #1561                             | 000000204852            |                 | Child Care Center  |  |  |
| Address<br>11737 SEVEN GABLES RD SYMMES TOWNSHIP<br>OH 45249 |                         |                 | County<br>HAMILTON |  |  |
| Building Approval Date                                       | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½  |  |  |
| 04/07/1999   | E                       | 180             |                    |  |  |
| Fire Inspection Approval Date                                | Food Service Risk Level |                 |                    |  |  |
| 03/16/2023   | Level III               |                 |                    |  |  |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection So                  | cope             | Inspection Notice |              |
| Follow-up                  | Full                           |                  | Unannounced       |              |
| Inspection Date 03/30/2023 | Begin Time 8                   | :45 AM           | End Time 11:30 AM |              |
| Reviewer:                  |                                |                  |                   |              |
| Nicole Vadnais             |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 10                             | 0                | 1                 | 10           |

| 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)                                  |                  | 18        | 0          | 18    |  |
| Young Toddler   |                  | 10        | 0          | 10    |  |
| Total Under 2 ½ Years                                     | 62               | 28        | 0          | 28    |  |
| Older Toddler   |                  | 10        | 0          | 10    |  |
| Preschool   |                  | 29        | 0          | 29    |  |
| School Age  |                  | 30        | 0          | 30    |  |
| Total Capacity/Enrollment                                 | 162              | 69        | 0          | 97    |  |

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

| Infant C   | 0 to < 12 months         | 3 to 9  | #1 combined |
|------------|--------------------------|---------|-------------|
| Infant C   | 0 to < 12 months         | 1 to 5  | #2          |
| Preschool  | 3 years to < 4 years     | 1 to 8  | #1          |
| Preschool  | 3 years to < 4 years     | 1 to 10 | #2          |
| Infant A/B | 0 to < 12 months         | 3 to 9  | #1 combined |
| Infant A/B | 0 to < 12 months         | 2 to 8  | #2          |
| Toddler A  | 18 months to < 30 months | 2 to 14 | #1 combined |
| Toddler A  | 18 months to < 30 months | 1 to 7  | #2          |
| Toddler B  | 18 months to < 30 months | 2 to 14 | #1 combined |
| Toddler B  | 30 months to < 36 months | 1 to 7  | #2          |
| PreK       | 4 years to < 5 years     | 3 to 12 | #2          |
| PreK       | 4 years to < 5 years     | 1 to 11 | #1          |

## **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: 09 Children's Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 numbers 5, 13, 18, 19, and 29 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.
- 29. The program used an old version of the JFS 01236.

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: 04/29/2023



### **Low Risk Non-Compliances**

**Domain: 00 License & Approvals** 

Rule: 5101:2-12-02 Current Information

<u>Code</u>: The rule requires the program to request an administrator amendment, and submit qualifications for a new administrator, within thirty days of the change.

<u>Finding</u>: During the inspection, it was determined that a change of administrator had been made and the owner or administrator had failed to provide notification of this change to the Department and/or submit qualifications for the new administrator within 30 days. A license is only valid for the licensee, administrator, address and license capacity designated on the license. Technical assistance was provided, and as discussed, submit the request to amend the license and any required documentation, if applicable, through the licensing system, OCLOS.

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

Rule: 5101:2-12-12 Safe Equipment

<u>Code</u>: 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 magnet tiles were not followed in that they are intended for ages 3 and up.

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: 04/29/2023

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 number 4 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 [ ].

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: 04/29/2023

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

Rule: 5101:2-12-17 Materials and Equipment

Code: The program is required to have enough equipment for all children in care.

<u>Finding</u>: During the inspection, it was determined that equipment, materials, and furnishings provided for indoor and outdoor play did not meet the requirement of the rule as noted in numbers 1 and 2 below:

- 1. Not varied and adequate to meet the developmental needs of the children;
- 2. Not sufficient that each child can be actively involved in an activity.

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: 06 Program Information**

Rule: 5101:2-12-14 Transportation - Driver Requirements

<u>Code</u>: The program is required to have children and staff practice and document safely exiting vehicles during an emergency.

<u>Finding</u>: During the inspection, it was determined that the program had not conducted and/or documented monthly emergency exiting drills on vehicles with children, including the date of the drill and all staff who transport children. 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: 04/29/2023

#### **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: 04/29/2023

#### 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: 04/29/2023

#### **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.

<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: 04/29/2023

#### Domain: 09 Children's Files

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

<u>Code</u>: 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 2 and 8 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: 04/29/2023

#### Domain: 09 Children's Files

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

<u>Code</u>: 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, 5, 6, 7, 10, 12, and 13 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.



|   | Beginning! |
|---|------------|
|   |            |
|   |            |
|   |            |
|   |            |
|   |            |
|   |            |
|   |            |
| _ |            |
|   |            |
|   |            |

# Rules In-Compliance/Not Verified

| 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.                               |
| Pulo                              | Status              | Decumenting Statement(s) If applicable  |
| Rule<br>5101:2-12-03 Inspection   | Status<br>Compliant | Documenting Statement(s), If applicable |
| Requirements                      | Compliant           |   |
| Rule                              | Chatus              | Decumenting Statement/s) If applicable  |
| 5101:2-12-04 Building Department  | Status<br>Compliant | Documenting Statement(s), If applicable |
| Inspection                        | Comphant            |   |
| Inspection                        |                     | I                                       |
| 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   | Compliant           | Documenting Statement: The food service |
| Requirements                      |                     | license was observed posted.            |
| Rule                              | Status              | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Administrator  | Compliant           | Documenting Statement: The              |
| Qualifications                    | Compilation         | administrator has completed the rules   |
| Quamicutions                      |                     | review course.                          |
|                                   |                     | 1.63.63.65.6                            |
| Rule                              | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator        | Compliant           |   |
| Responsibilities/Requirements     |                     |   |
| Rule                              | Status              | Documenting Statement(s), If applicable |

| Pular F101r2 12 07 Writton Brogram  | Compliant | Decumenting Statement, The written   |
|-------------------------------------|-----------|--|
| Rule: 5101:2-12-07 Written Program  | Compliant | Documenting Statement: The written   |
| Policies and Procedures             |           | policies and procedures reviewed on the  |
|                                     |           | day of the inspection were verified as   |
|                                     |           | complete.  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the  |
| Requirements                        |           | inspection, the required documentation   |
|                                     |           | regarding background checks was on file  |
|                                     |           | for all employees listed.  |
|                                     |           |  |
|                                     | Ι.        |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-10 Health Training  | Compliant | Documenting Statement: The program   |
| Requirements                        |           | had at least one Child Care Staff Member   |
|                                     |           | with currently valid training in First Aid,  |
|                                     |           | Management of Communicable Disease,  |
|                                     |           | CPR, and Child Abuse Prevention present  |
|                                     |           | and readily accessible during all hours of   |
|                                     |           | operation.   |
|                                     |           |  |
|                                     |           |  |
| 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 |  |
| Under 2 1/2 Years                   |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Space    | Compliant | Documenting Statement: The quarterly   |
| •                                   | Compilant |  |
| Requirements                        |           | playground inspections were completed  |
|                                     |           | and documented, as required.   |
|                                     | 1         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Sanitary         | Compliant | Documenting Statement: During the  |
| Equipment and Environment           |           | inspection, the requirements of the rule   |
|                                     |           | regarding sanitary equipment and   |
|                                     |           | environment were discussed.  |
|                                     |           | The second secon |
|                                     |           |  |
| 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<br>Environment                   | Compliant | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.   |
|--|-----------|--|
| Dula   | Chahua    | Decumenting Statement(s) If applicable   |
| Rule: 5101:2-12-14 Transportation and Field Trip Procedures    | Compliant | Documenting Statement(s), If applicable  Documenting Statement: The program uses the ODJFS sample trip permission form for routine trips to secure written permission from parents or guardians. |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-14 Transportation -<br>Vehicle Requirements    | Compliant | Documenting Statement: An annual safety check of the vehicle(s), using the JFS 01230 "Vehicle Inspection Report For Child Care Centers" form, was verified and dated 4/26/22.                    |
|  |           | D 11 61 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required.      |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Emergency Drills                            | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding emergency drills were discussed.  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 First Aid/Standard Precautions              | Compliant | Documenting Statement: During the 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 Communicable Disease          | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding management of communicable diseases were discussed.   |
| Pulo   | Ctatus    | Documenting Statement/s) If applicable   |
| 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 | Compliant           | Documenting Statement: The program's      |
| Plan                                | Compilation         | written disaster plan was reviewed during |
| 1.0                                 |                     | the inspection and met the requirements.  |
|                                     |                     |   |
| Rule: 5101:2-12-16 Written Disaster | Compliant           | Documenting Statement: During the         |
| Plan                                |                     | 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           |   |
| ,                                   | '                   |   |
| Pula                                | Ctatus              | Documenting Statement of the section is   |
| Rule                                | Status<br>Compliant | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Outdoor Play     | Compilant           |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-18 License Capacity       | Compliant           |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Ratio            | Compliant           | Documenting Statement: Staff/child        |
|                                     | '                   | ratios observed during the inspection     |
|                                     |                     | were in compliance.                       |
|                                     |                     |   |
| D. J.                               | Chahara             | December 1 Chate and the life and leading |
| Rule 5101:2-12-18 Group Size        | Status Compliant    | Documenting Statement(s), If applicable   |
| 3101.2-12-18 Group Size             | Compilant           |   |
|                                     |                     |   |
| 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.                             |
|                                     |                     |   |
| D. J.                               | Status              | Documenting Statement(s), If applicable   |
| Rule                                | Jiaius              | Documenting Statement(s), if applicable   |

| Beg <u>inning!</u>                   |           |  |
|--------------------------------------|-----------|--|
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-19 Child Guidance          | Compliant |  |
|                                      | ·         |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-20 Cots and Napping        | Compliant |  |
|                                      | ·         |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-20 Cribs                   | Compliant |  |
|                                      | ,         |  |
|                                      | •         | ,  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-22 Meal and Snack    | Compliant | Documenting Statement: During the        |
| Requirements                         |           | inspection, the requirements of the rule |
| . negan ements                       |           | regarding meals and snacks were          |
|                                      |           | discussed.                               |
|                                      |           | uiscusseu.                               |
|                                      |           |  |
| Dula                                 | Chahua    | Decomposition Chatamantal If applicable  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-22 Fluid Milk Requirements | Compliant |  |
|                                      |           |  |
| D. I.                                | C         |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-22 Safe Food               | Compliant |  |
| Handling/Storage                     |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-23 Infant Daily Care       | Compliant |  |
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were  |
| Food Preparation                     |           | labeled as required.                     |
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-23 Diapering and Toilet    | Compliant |  |
| Training                             | ·         |  |
| U                                    | I         |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-25 Medication              | Compliant | bocamenting statement(s), it applicable  |
|                                      | Compilant |  |
| Administration                       |           |  |
|                                      |           |  |
|                                      |           |  |