



## 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 MINNIE MIRACLES	Program Number 000000300679	Program Type Child Care Center	
Address 2009 West Prospect Rd Ashtabula OH 44004		County ASHTABULA	
Building Approval Date 03/12/2020	Use Group/Code E	Occupancy Limit 59	Maximum Under 2 ½
Fire Inspection Approval Date 05/01/2023	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/05/2023	Begin Time 11:15 AM	End Time 3:00 PM
Reviewer: Erica Adams		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 15	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 17

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)		11	0	11
Young Toddler		0	0	0
<b>Total Under 2 ½ Years</b>	59	11	0	11
Older Toddler		1	0	1
Preschool		3	0	3
School Age		0	0	0
<b>Total Capacity/Enrollment</b>	59	4	0	15

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



Infant	0 to < 12 months	1 to 3	Programming
Infant	12 months to < 18 months	1 to 1	Programming
Infant	12 months to < 18 months	1 to 7	Lunch - 1 Older Infant, Young Toddlers, Older Toddlers, and PreK combined
Infant	12 months to < 18 months	1 to 1	Programming
Infant	12 months to < 18 months	2 to 5	Programming - Older Infant, Toddlers, and PreK combined
Younger Toddler	18 months to < 30 months	1 to 7	Programming - Younger Toddler, Older Toddler, and PreK combined

### 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: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.



**Finding:** During the inspection, a ratio of 1 child care staff member(s) for 7 children was determined to have occurred for the Infant, Younger Toddler, Older Toddler, and PreK groups when the situation in number 1 below occurred:

1. A child care staff member stepped out of the room.
2. A child care staff member had not arrived at work on time.
3. Children were present who were not scheduled to be there.
4. A child care staff member was unable to work.
5. A child was injured in that group.
6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
9. Ratio was doubled for more than two hours while children were napping.
10. Ratio was doubled while children were napping for a group that included at least one infant.
11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other [ ].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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: 11/04/2023

**Domain: 01 Ratio & Supervision**

**Rule:** 5101:2-12-19 Supervision

**Code:** The program staff is required to supervise children in their assigned group by sight and hearing.

Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

**Finding:** During the inspection, it was determined that children were left unattended while inside the program as noted in number 1 below:

1. Child(ren) were left unattended once.
2. Child(ren) were left unattended more than once.
3. Child(ren) left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.



5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other [ ].

Children must be supervised and within sight and hearing of a child care staff member at all times. 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: 11/04/2023

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-20 Cribs

Code: The program staff is required to remove any items listed in rule that are a potential suffocation risk from cribs.

Finding: During the inspection, it was determined that a child had been placed in a crib with an object that created a potential strangulation or suffocation risk, as indicated in number 4 below:

1. Bib
2. Pacifier clip/ribbon
3. Teething jewelry
4. Blanket for infant under twelve months old
5. Pillow
6. Boppy
7. Bumper pad
8. Clothing stored in the crib
9. Diaper bag
10. Object or toy strung over the crib in which a child can pull himself up
11. Stuffed animal that is large/soft enough to conform to the shape of the child's face
12. Other [ ]

The rule prohibits any item which obstructs child-care staff's visibility or poses a risk of strangulation or suffocation from being placed on or in a crib. Remove the item(s) immediately. 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: 11/04/2023



### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number 4 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 11/04/2023

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 2 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.



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

Corrective Action Plan Due: 11/04/2023

**Domain: 02 Safe & Sanitary Environment**

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

Code: The program is required to provide equipment and materials that are easy to clean.

Finding: During the inspection, it was determined that at least one piece of equipment, furnishings, or material at the program, the diaper changing pad in the infant area, was not constructed of materials to facilitate cleaning as noted in number 1 below:

1. The material had a tear.
2. The material was not washable.
3. The material was porous.
4. The surface was cracked.
5. The surface was repaired, but in a manner that still did not facilitate cleaning.
6. Other [ ].

Equipment, furnishings, and furniture shall be constructed of materials to facilitate cleaning. 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: 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 2 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: 11/04/2023

**Domain: 03 Postings & Equipment**

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

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number 1, 2, 3 below (no fire/weather plan in the Library/Crib room, no weather diagram in all other rooms):

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for [ ].
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 11/04/2023

**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 immediate risk.



Finding: During the inspection, it was determined that an outdoor play area was used which was not protected from traffic and other hazards by a fence in good repair, or other barrier. Although the fence or natural barrier was not meeting the rule requirements, it was determined to not present an immediate risk for a child to be able to leave the playground. The fence or gate was not in good repair and/or being used inappropriately as noted in number 10 below:

1. The fencing had missing slat boards.
2. The fencing was broken.
3. The fencing was loose.
4. The fencing was rotting.
5. The gate was broken and did not close.
6. The gate was locked.
7. The latch on the gate was broken.
8. The latch was easily opened by children on the playground.
9. The latch was not engaged to prevent children from opening the gate.
10. The gate had no latch.
11. There were bolts with more than two threads exposed along a fence line or gate on a playground.

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

Corrective Action Plan Due: 11/04/2023

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-12-11 Separation of Children Under 2 1/2 Years

Code: The program is required to separate children younger and older than 2 1/2 years of age.

Finding: During the inspection, it was determined that a group was occupying space not previously approved by the Department for children less than two and one-half years of age. Building and fire department approvals do not prohibit the use of this space for children less than two and one-half years. 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: 04 Indoor/Outdoor Space**

Rule: 5101:2-12-11 Separation of Children Under 2 1/2 Years





**Code:** The program is required to separate children younger and older than 2 1/2 years of age.

**Finding:** During the inspection, it was determined that 3 children were in attendance in the Library/Crib room at one time. The floor space allows for 2 children in this room. The program needs to reduce the number of children in attendance so there is 35 square feet of space for each child. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/04/2023

**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.

**Finding:** During the inspection, it was determined that the required drills were not completed for item number(s) 1, 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: 11/04/2023

**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-23 Infant Bottle and Food Preparation

**Code:** The program staff is required to label bottles containing formula or breast milk.

**Finding:** During the inspection, it was determined that bottles containing [breast milk/formula] for a particular infant were not labeled with the child's name and date of preparation. 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:** 5101:2-12-10 Health Training Requirements

**Code:** The program is required to maintain a staff schedule with coverage of the required health trainings.

**Finding:** In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 10 and 11 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of [ ] and [ ] did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
5. CPR – child care staff scheduled during the hours of [ ] and [ ] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [ ] and [ ] had expired training
10. Communicable Disease – child care staff scheduled between the hours of 7:30am and 8am Mondays and Tuesdays, and between the hours of 1pm and 3:30pm Wednesdays through Fridays had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
13. Child Abuse – child care staff scheduled during the hours of [ ] and [ ] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program’s corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/04/2023

**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 number 1 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: 11/04/2023

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-08 Medical Statement

**Code:** The program staff's medical statements are required to be completed and on file at the program.

**Finding:** In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 1 below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies 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);
6. Tuberculosis (TB) screening/test information was missing:
  - 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 6a.
  - 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: 11/04/2023

**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. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 11/04/2023

**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.

Finding: 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 number(s) 1 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: 11/04/2023

**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 number 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.

**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-12-16 Written Disaster Plan

Code: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

Finding: During the inspection, it was determined the program’s written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 2 below:

- 1. Child care staff members and employees were not trained annually.
- 2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 11/04/2023

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 5/1/24.
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The program has obtained a food service exemption status from the local health department.
5101:2-12-05 Denial, Revocation and Suspension	Compliant	
5101:2-12-07 Administrator Qualifications	Compliant	
5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: The written 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 Requirements	Compliant	Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Professional Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.
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 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
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	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
5101:2-12-14 Transportation and Field Trip Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: At the time of the inspection, there were no children





		currently enrolled who had health conditions.
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 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
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 Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
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
5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-22 Fluid Milk Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Safe Food Handling/Storage	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-23 Infant Daily Care	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-23 Diapering and Toilet Training	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-24 Swimming and Water Safety Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-25 Medication Administration	Compliant	Documenting Statement: There were no children on medication at the time of the inspection; however, the method of storage and practices for the administration were reviewed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	