



## 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 JEFFREY MANSION PRESCHOOL- BEXLEY RECREATION DEPT	Program Number 000000402722	Program Type Child Care Center	
Address 165 N PARKVIEW AVENUE BEXLEY OH 43209		County FRANKLIN	
Building Approval Date 05/02/2013	Use Group/Code E	Occupancy Limit 125	Maximum Under 2 ½ 0
Fire Inspection Approval Date 12/19/2016	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 11/01/2022	Begin Time 9:30 AM	End Time 1:08 PM
Inspection Date 11/01/2022	Begin Time 9:30 AM	End Time 1:11 PM
Reviewer: Colleen Adkinson		
Reviewer: AMY HILLARD		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 12	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 14

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)		0	0	0
Young Toddler		0	0	0
<b>Total Under 2 ½ Years</b>	0	0	0	0
Older Toddler		0	0	0
Preschool		30	7	37
School Age		0	0	0



<b>Total Capacity/Enrollment</b>	68	30	7	37
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<b>Staff-Child Ratios at the Time of Inspection</b>			
<b>Group</b>	<b>Age Group/Range</b>	<b>Ratio Observed</b>	<b>Comment</b>
Super Stars	3 years to < 4 years	1 to 7	
Super Stars	3 years to < 4 years	1 to 7	
Owls	3 years to < 4 years	2 to 11	
Owls	3 years to < 4 years	2 to 11	
Fish	3 years to < 4 years	2 to 13	
Fish	3 years to < 4 years	2 to 13	
Rainbow	3 years to < 4 years	2 to 13	
Rainbow	3 years to < 4 years	2 to 14	

**Summary of Non-Compliances**

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

**Serious Risk Non-Compliances**

**No Serious Risk Non-Compliances were observed during this inspection**

**Moderate Risk Non-Compliances**

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Environment

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

**Finding:** During the inspection, a potentially hazardous item or toxic substance was used or stored in an unlocked closet on a low shelf between fish and owl classroom where children had access to it, as noted in number(s) 2 below.



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

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

Corrective Action Plan Due: 12/01/2022

**Domain: 08 Staff Files**

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

**Code:** The program is required to have staff update their background checks every five years as required.

**Finding:** In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number(s) 3 below:

1. Owner;
2. Administrator;
3. Child Care Staff Member, employee.

Submit the program's corrective action plan, which includes a statement the background check update has been requested, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/01/2022



**Domain: 09 Children's Files**

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

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

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1, 16, 17, 18, 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 (no doctor signature no RX label)
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

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



Corrective Action Plan Due: 12/01/2022

### Low Risk Non-Compliances

#### Domain: 00 License & Approvals

Rule: 5101:2-12-03 Inspection Requirements

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

Finding: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 4/27/22. 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: 12/01/2022

#### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 5 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). Purse hanging on low hook, in unlocked closet in between fish and owl classrooms
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: 12/01/2022

### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

Finding: During the inspection, it was determined that 1 surge protectors/outlets (super stars classroom) did not have childproof receptacle covers. The program must have safety covers on all electrical outlets, including power strips and surge protectors, which are within the reach of the children. 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(s) 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: 12/01/2022

**Domain: 03 Postings & Equipment**

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

Code: The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.

Finding: During the inspection it was determined that the JFS 01201 "Dental First Aid" was not posted in a location readily available to center staff and parents as required (old form was used, please update to the current form). 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: 5101:2-12-17 Materials and Equipment

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

Finding: During the inspection, it was determined that equipment and materials in the following categories 8 were not provided in sufficient quantities for children in the Owls classroom, as required by the rule:

1. Art supplies (excludes infants);
2. Manipulative materials and equipment;
3. Blocks;
4. Science-nature equipment (excludes infants);



5. Language arts and auditory materials and equipment;
6. Pretend or dramatic play materials;
7. Music equipment;
8. Transportation materials and equipment;
9. Gross motor equipment;
10. Sensory motor equipment.

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: 05 Health & Safety**

**Rule:** 5101:2-12-16 First Aid/Standard Precautions

**Code:** The program is required to have a first aid kit onsite.

**Finding:** During the inspection, it was determined first aid kit(s) at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in number(s) 13 below:

1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
2. One roll of hypoallergenic first-aid tape.
3. Individually wrapped sterile gauze squares in assorted sizes.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.
6. Gauze rolled bandage.
7. Triangular bandage.
8. Rounded end scissors.
9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).
10. A working digital thermometer.
11. Disposable non-latex gloves.
12. A working flashlight.
13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit. (missing in Owl first aid kit)
14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.
15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only).
17. Bottled water (field trip or transporting away from the program only).





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) 1, 4, 9, 12 below:

1. First Aid – child care staff members scheduled during the hours of 5:00 and 5:30 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 5:00 and 5:30 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 5:00 and 5:30 had expired training
10. Communicable Disease – child care staff scheduled during the hours of [ ] and [ ] 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 5:00 and 5:30 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: 12/01/2022



**Domain: 08 Staff Files**

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

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

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 4, 5 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: 12/01/2022

**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(s) 1, 2, 3, 4, 5, 6 below:

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



6. The CPR training was expired.

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

Corrective Action Plan Due: 12/01/2022

**Domain: 08 Staff Files**

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

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

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 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: 12/01/2022

**Domain: 08 Staff Files**

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

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

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

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.



5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development

6. Other [ ].

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

Corrective Action Plan Due: 12/01/2022

**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, 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: 12/01/2022



**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".

**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(s) 4, 10 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 (put NA in work info if not working)
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 (missing program name in the box)
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other [ ]

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

**Rules In-Compliance/Not Verified**



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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 12/17/22.
Rule	Status	Documenting Statement(s), If applicable
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.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Medical Statement	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed



		and documented, as required. The most recent inspection report form was dated 7/6/22.
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
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Staff and children were observed washing hands as required by the rule.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: No smoking was allowed on the premises, and the notice stating that smoking is prohibited was observed posted in a conspicuous place.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Toothbrushing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
5101:2-12-16 Written Disaster Plan	Compliant	
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
5101:2-12-17 Daily Outdoor Play	Compliant	
5101:2-12-18 License Capacity	Compliant	
5101:2-12-18 Ratio	Compliant	
5101:2-12-18 Group Size	Compliant	
5101:2-12-18 Attendance Records	Compliant	
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.
5101:2-12-19 Child Guidance	Compliant	
5101:2-12-20 Cots and Napping	Compliant	
5101:2-12-22 Meal and Snack Requirements	Compliant	





Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	