

Family Child Care 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	Program Number	Program Type
LAMAR, ZELDA	00000917483959	FCC - Type B Home
Address		County
12020 CONTINENTAL		CUYAHOGA
CLEVELAND		
OH 44120		

Inspection Information				
Inspection Type	Inspection Se	соре	Inspection Notice	
Compliance	Full		Unannounced	
Inspection Date	Begin Time		End Time	
10/20/2023	2:00 PM		4:00 PM	
Reviewer:				
Peggy Henderson				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	14	0	1	15

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
Guerry B	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		3	0	3
Young Toddler		1	0	1
Total Under 2 Years	3	4	0	4
Older Toddler		0	0	0
Preschool		2	0	2
School Age		8	0	8
Total Capacity/Enrollment	6	10	0	14

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
zelda lamar	Mixed Age Group	2 to 4	



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: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

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

Findings: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 4 below:

1. The request for a background check for child care was not submitted in the OPR.

2. The fingerprints were not submitted electronically according to the process established by BCI.

3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.

4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/01/2023



Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes Code: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Findings: During the inspection, it was determined that the Type B Home did not have a working smoke alarm 2nd floor on each level of the home] or smoke alarm(s) were not [placed/installed/tested/maintained] in accordance with manufacturer's recommendations. A working smoke alarm must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 12/01/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

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 program for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 1 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: 12/01/2023



Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Clean environment and equipment Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following number(s) 4 below, were in the [] restroom:

- 1. There was no liquid soap.
- 2. There was no toilet tissue.
- 3. There were no individually assigned towels or disposable towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.
- 6. The toilet was not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.

9. Other [].

The restroom(s) must be kept sanitary at all times. Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/01/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number(s) 7 below:

- 1. The plan was not posted on each level of the home used for child care.
- 2. The name, address and telephone number of the program were not complete.

3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.

4. 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.

- 5. Location of children's records was not complete.
- 6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.

7. The current version of the prescribed form was not used.

8. 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: 12/01/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-13-17 Programming

Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not [posted/in a visible place] in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/01/2023

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips

Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Findings: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in number(s) 1,9 below:

1. Written parental permission was not secured for field trips and/or routine trips off the premises.

- 2. The written permission was missing the child's name.
- 3. The written permission was missing the date(s) of the trip(s) (field trips only).
- 4. The written permission was missing the destination(s) of the trip(s).
- 5. The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
- 6. The written permission was missing the signature of the parent.
- 7. The written permission was missing the date on which the permission was signed.
- 8. The written permission was missing a statement notifying parents how their child will be transported.
- 9. Permission forms for routine trips were not being updated annually.

10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.

11. Other: [].

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

Corrective Action Plan Due: 01/13/2024



Domain: 08 Staff Files

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number(s) 1,6.

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 Provider.

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

Corrective Action Plan Due: 12/01/2023

Domain: 08 Staff Files

Rule: 5101:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number(s) 1,4 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of the completion of First Aid training
- 3. First Aid documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 4. CPR expired training
- 5. CPR had not taken CPR training
- 6. CPR did not have verification of the completion of CPR training
- 7. CPR training taken did not include all age groups and developmental levels of all children in care

8. CPR - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training

- 10. Communicable Disease expired training
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of CD training

13. Communicable Disease - documentation did not demonstrate the person who provided the training met the

trainer qualifications as stated in the rule

14. Child Abuse - expired training



15. Child Abuse - had not taken Child Abuse training

16. Child Abuse - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/01/2023

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements Code: The program staff is required to obtain the required trainings to meet the requirements.

Findings: In review of the staff records, it was determined the training requirements were not met for the Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes copies of verification of training, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/01/2023

Domain: 08 Staff Files

Rule: 5101:2-13-08 Employee Requirements Code: The program is required to obtain completed medical statements for all program staff.

Findings: In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number(s) 3,4.

1. A medical statement was not on file;

- 2. The medical statement(s) on file were not dated within 12 months of the individual'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 individual 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);

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

Corrective Action Plan Due: 12/01/2023



Domain: 08 Staff Files

Rule: 5101:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2 below:

1. The provider had not created or updated their individual profile in the OPR.

2. The provider had not created or updated the program's organizational dashboard in the OPR.

3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.

4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.

6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.

7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.

8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.

9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.

10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.

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

Corrective Action Plan Due: 12/01/2023

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" on file for each child in care.

Findings: During the inspection, it was determined the provider did not [obtain or maintain the required liability insurance/have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care]. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.



Corrective Action Plan Due: 12/01/2023

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records Code: The program is required to have all children's records available.

Findings: During the inspection, it was determined that children's records had not been available to the Department and/or the Ohio Department of Health. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/01/2023

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review 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) 1,2,4,13 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 []

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



Corrective Action Plan Due: 12/01/2023

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records Code: The program is required to have a completed medical on file for each child.

Findings: In review of 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.

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Corrective Action Plan Due: 12/01/2023

Rules In-Compliance/Not Verified

Rule

Status

Documenting Statement(s), If applicable



5101:2-13-02 License Visible	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Voluntary Temporary Closure	Compliant	
Rule 5101:2-13-02 Change of Location	Status Compliant	Documenting Statement(s), If applicable
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Rule 5101:2-13-02 Information in OCLQS	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-02 Provider Medical	Status Compliant	Documenting Statement(s), If applicable
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Rule 5101:2-13-03 Inspection Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements for Type B Homes	Compliant	Documenting Statement(s), if applicable
Rule 5101:2-13-04 Flammable and Combustible Materials in a Type B Home	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster Parent	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-13-08 Whistle Blower	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	Documenting statement(s), if applicable
Rule	Status	Decumenting Statement(s) If applicable
5101:2-13-11 Outdoor Equipment	Compliant	Documenting Statement(s), If applicable
Rule	Status	Decumenting Statement(s) If emplicable
5101:2-13-11 Fall Zone	Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-12 Safe Equipment	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-12 Safe Environment	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-13 Handwashing	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	Documenting statement(s), if applicable
Rule 5101:2-13-14 Ratio and Supervision for Field and Routine Trips	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Decumenting Statement(a) If annliable
5101:2-13-14 Driver Requirements	Status Compliant	Documenting Statement(s), If applicable



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	Documenting statement(s), if applicable
	compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard	Compliant	Documenting Statement(S), if applicable
Precautions	compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	
L		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	

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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap	Compliant	
Requirements		
Requirements		
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Rule	Status	Decumenting Statement(s) If applies her
	Status	Documenting Statement(s), If applicable
5101:2-13-20 Crib and Playpen	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight	Compliant	
Care		
Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(3), it applicable
5101:2-13-21 Sanitary Environment	Compliant	
and Hygiene		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Meals and Snacks	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Fluid Milk	Compliant	
5101:2-15-22 FIUID WIIK	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
Bula	Status	Desumenting States and (a) If any list h
Rule		Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for	Compliant	
Swimming	Compliant	
Jownning		
-	F	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication	Compliant	
Requirements		
a		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and	Compliant	
Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide		Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule	Compliant Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule	Compliant Status	
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule	Compliant Status	
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space	Compliant Status Compliant	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space Rule	Compliant Status Compliant Status Status	
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space	Compliant Status Compliant	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space	Compliant Status Compliant Status Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space	Compliant Status Compliant Status Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space Rule 5101:2-13-24 On-site Pools	Compliant Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space Rule 5101:2-13-24 On-site Pools Rule	Compliant Status Compliant Status Compliant Status Compliant Status Status Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space Rule 5101:2-13-24 On-site Pools	Compliant Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space Rule 5101:2-13-24 On-site Pools Rule	Compliant Status Compliant Status Compliant Status Compliant Status Status Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only Rule 5101:2-13-11 Indoor Space Rule 5101:2-13-24 On-site Pools Rule	Compliant Status Compliant Status Compliant Status Compliant Status Status Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable



Department of Education Department of Job and Family Services

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and	Compliant	
Equipment		