

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
Heavens Little Angels II	000000918132297	FCC - Type B Home
Address		County
3417 W. 41ST STREET		CUYAHOGA
CLEVELAND		
OH 44109		

	Insp	ection Information		
Inspection Type	Inspection So	cope	Inspection Notice	
Compliance	Full	6049	Unannounced	
Inspection Date	Begin Time		End Time	
10/09/2024	9:35 AM		1:12 PM	
Reviewer:	·			
Patricia Hill				
	Sur	mmary of Findings		
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	18	0	2	16

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

S	Staff-Child Ratios at the Time of Inspection		
Group	Age Group/Range	Ratio Observed	Comment
Group 1	18 months to < 30 months	2 to 2	



Summary of Non-Compliances

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

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

Moderate Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Fall Zone

Code: The program is required to have an adequate fall surface on the outdoor playground.

Findings: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in the following number 1 below:

- 1. No fall surface for two slides.
- 2. Adequate fall surface to soften the impact of a fall
- 3. Other []

Any equipment designed for climbing, swinging, bouncing, or sliding needs a fall zone of protective material resilient under and around the equipment in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/09/2024

Domain: 09 Children's Files

Rule: 5101:2-13-15 Health Conditions



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 and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Findings: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number 1 below:

1. No plan was on file.

(Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.
- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete. (Page 2)
- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

(Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

(Page 4)

- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.



- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. 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.

Provide staff training. 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: 11/09/2024

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-03 Inspection Requirements

Code: The program is required to respond to all non-compliances by the date noted in the inspection report.

Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 5/4/2024. The rule requires the program 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: 11/09/2024



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 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: 11/09/2024

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 numbers 4 and 5 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: 11/09/2024



Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 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.

Findings: 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 the following numbers 1, 7, and 22 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers.
- 2. Open pull cords that are not closed loop.
- 3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Telephone cords.
- 7. Employee purse.
- 8. Diaper bags.
- 9. Television not securely anchored.
- 10. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 11. Staff member stepped over a barrier/gate while holding a child.
- 12. Chipping or peeling paint.
- 13. An area rug did not have a nonskid backing.
- 14. An area rug presented a tripping hazard.
- 15. A floor surface was unsafe in that [].
- 16. No platform was provided for the sink or toilet.
- 17. The platform provided for the sink or toilet was not sturdy.
- 18. The platform provided for the sink or toilet posed a safety hazard in that [].
- 19. Emergency exits were blocked by the following furniture in that [].
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Extension cord in the doorway could be a tripping hazard.

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

Corrective Action Plan Due: 11/09/2024

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Emergency Preparedness and Response Plan

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



Findings: During the inspection, it was determined the program's written emergency and preparedness and response plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 1 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: 11/09/2024

Domain: 05 Health & Safety

Rule: 5101:2-13-16 First Aid Kit/Standard Precautions

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit onsite as required, that included all items listed in the appendix A of the rule. The kit was missing the item or the item was not replaced after use and/or expired listed in number 2 below:

- 1. One roll of first-aid tape;
- 2. Individually wrapped sterile gauze;

squares in assorted sizes;

- 3. Sterile adhesive bandages in assorted sizes;
- 4.Tweezers:
- 5. Gauze rolled bandage;
- 6. Triangular bandage;
- 7. Rounded end scissors;
- 8. 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);
- 9. A working digital thermometer;
- 10. Disposable non-latex gloves;
- 11. A working flashlight;
- 12. 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;
- 13. 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;
- 14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
- 15. Soap or waterless sanitizer (field trip or transporting away from the program only);
- 16. Bottled water (field trip or transporting away from the program only).

Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 11/09/2024

Domain: 06 Program Information

Rule: 5101:2-13-14 Vehicle Inspections

Code: The program is required to complete and document weekly vehicle inspections.

Findings: During the inspection, it was determined that the program had not documented weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

- 1. A visual inspection of the tires for wear and tire pressure;
- 2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges;
- 3. An inspection for properly functioning child and driver restraints;
- 4. An inspection for properly functioning doors and windows;
- 5. An inspection for, and cleaning of, debris from the inside of the vehicle;
- 6. Other [].

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

Corrective Action Plan Due: 11/09/2024

Domain: 06 Program Information

Rule: 5101:2-13-24 On-site Pools

Code: The provider and program staff are required to make pools on the premises inaccessible to children.

Findings: During the inspection, it was determined a pool was located on the premises and was accessible to children in care as there was no fence or physical barrier as outlined in rule in that the pool was uncovered. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/09/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation

Code: The program is required to retain and update infant feeding instructions.

Findings: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review form was not on file as required by this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.



Corrective Action Plan Due: 11/09/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-20 Crib and Playpen Requirements

Code: The program is required to use a crib/playpen according to manufacturer's guidelines.

Findings: During the inspection, it was determined that a playpen was not being used according to manufacturer's instructions. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/09/2024

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 indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number 1.

- 1. The child care staff member 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 verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/09/2024

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to reside at the licensed location, not have additional activities or employment during the program's operating hours, be on-site at the program for at least 75 percent of the program's operating hours, and have hours of availability posted in a noticeable place.

Findings: During the inspection, it was determined that the provider was not meeting the following requirements as noted in number 2 below:



- 1. The provider no longer resides at the licensed location.
- 2. The licensed provider has additional employment during operating hours.
- 3. The provider was not on-site for 75 percent of the program's operating hours as required by this rule.
- 4. The provider did not have hours of availability to meet with parents a noticeable location.

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

Corrective Action Plan Due: 11/09/2024

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements

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.

Findings: In review of the staff records, it was determined that the substitute child care staff member did not meet the requirements for completing the online orientation training as noted in number 2 below:

- 1. The training was not completed 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.
- 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: 11/09/2024

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 trainings listed in numbers 10 and 14 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: 11/09/2024

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 numbers 6 and 16 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. The start date at program was missing.



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

Corrective Action Plan Due: 11/09/2024

Domain: 10 Written Policies & Procedures

Rule: 5101:2-13 Written Policies and Procedures

Code: The program's written policies and procedures are to be given to all parents and employees and be available at the program.

Findings: During the inspection, it was determined the written policies and procedures were not given to parents/all employees as required. A copy must be made available onsite for review. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 11/09/2024

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Visible	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-02 Voluntary Temporary	Compliant	
Closure		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-13-02 Provider Medical	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements for Type B Homes	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Safety for Type B Homes	Compliant	bocamenting statement(s), it applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	
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 Staff Records	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 Employee Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	
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Rule 5101:2-13-09 Background Checks	Status Compliant	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	



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5101:2-13-11 Outdoor Equipment	Compliant	
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5101:2-13-12 Safe Equipment	Compliant	
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5101:2-13-13 Handwashing	Compliant	
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5101:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
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and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(3), if applicable
5101:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
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5101:2-13-22 Meals and Snacks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Fluid Milk	Compliant	
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5101:2-13-22 Food Handling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
	100	Documenting Statement(s), if applicable
5101:2-13-23 Infant Daily Care	Compliant	
Rule	Status	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 Swimming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide	Compliant	bocumenting statement(s), if applicable
Detectors - Type B Only	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and	Compliant	
Equipment	Сотриате	