# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details |                 |                   |  |
|-----------------|-----------------|-------------------|--|
| Program Name    | Program Number  | Program Type      |  |
| Steps Ahead     | 000000935406058 | FCC - Type B Home |  |
| Address         |                 | County            |  |
| 2007 TERRAN WAY |                 | FRANKLIN          |  |
|                 |                 |                   |  |
| COLUMBUS        |                 |                   |  |
| OH 43219        |                 |                   |  |

| Inspection Information  |                                |                  |                   |              |
|-------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type         | Inspection S                   | cope             | Inspection Notice |              |
| Compliance              | Full                           |                  | Unannounced       |              |
| Inspection Date         | Begin Time                     |                  | End Time          |              |
| 04/25/2023              | 9:49 AM                        |                  | 10:37 AM          |              |
| Reviewer:               |                                |                  |                   |              |
| Jamie Nunamaker-Dukuray |                                |                  |                   |              |
| Summary of Findings     |                                |                  |                   |              |
| No. Rules Verified      | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 68                      | 5                              | 0                | 0                 | 6            |

| 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     |
| Total Under 2 Years                                       | 3                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 6                | 0          | 0         | 0     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| Steps Ahead                                  | Mixed Age Group | 1 to 0         |         |



## **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   |
| No Moderate Risk Non-Compliances were observed during this inspection |
|   |
|   |
|   |
|   |
|   |

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

**Domain: 02 Safe & Sanitary Environment** 

Rule: 5101:2-13-12 Pets

Code: The program is required to properly care for all pets.

Findings: During the inspection, it was determined that a pet at the program posed a threat to the safety or health of the children, in that proper licensing and inoculations not on file. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/25/2023

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

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing outdoor machinery around children.

Findings: During the inspections, potentially hazardous substances, which was determined to not present a serious risk to a child, was accessible to children as noted in number 11 below:

- 1. Cosmetics
- 2. Disinfecting wipes
- 3. Fish food
- 4. Hand lotion
- 5. Hand sanitizer (for children under 24 months).
- 6. Laundry detergent
- 7. Powder dish washing soap
- 8. Paint cans
- 9. White out
- 10. Potting soil
- 11. Other potentially hazardous substances: toxic cleaning agents

The potentially hazardous substance was determined to be accessible to children in the following area: in both the Kitchen and Program Restroom

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

Corrective Action Plan Due: 05/25/2023

#### **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 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: 05/25/2023

#### **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 01201 "Dental First Aid" and implement as required by rule.

Findings: During the inspection, it was determined the current JFS 01201 "Dental First Aid" was not completed and posted. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/25/2023

## Domain: 05 Health & Safety

Rule: 5101:2-13-16 Communicable Diseases

Code: The program is required to post the Ohio Communicable Disease Chart in a noticeable area.

Findings: During the inspection, it was determined that the Ohio Communicable Disease Chart was not posted as required, as indicated in the number 3 below:

- 1. In a location readily available to provider, child care staff members, employees, and residents;
- 2. The chart was not posted.
- 3. The posted chart was not the current version and the Child Care Manual Procedural Letter No. 159 was not posted next to the chart.
- 4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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

Corrective Action Plan Due: 05/25/2023

**Domain: 10 Written Policies & Procedures** 

Rule: 5101:2-13 Written Policies and Procedures

Code: The program is required to have policies and procedures for all items listed in this rule.

Findings: On the day of the inspection, the program's written policies and procedures provided to the parents/guardians and employees was missing item numbers 15 and 17 below:

#### General Information

- 1. Name, address, email address and telephone number.
- 2. Description of the provider's program philosophy.
- 3. Days and hours of operation, scheduled closings and basic daily schedule.
- 4. Staff/child ratios and group size.
- 5. Opportunities for parent involvement in activities.
- 6. Opportunities for parents to meet with the provider regarding their child.
- 7. Payment schedule, overtime charges and registration fees if applicable.
- 8. Programs shall have a policy in place describing supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

#### **Provider Policies and Procedures**

- 9. Enrollment including required enrollment information.
- 10. Care of children without immunizations.
- 11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
- 12. Supervision of children, including a separate supervision policy for school-age children, if applicable.
- 13. Child guidance.
- 14. Suspension and expulsion.
- 15. Ensure compliance with the Americans and Disabilities (ADA) including administering medication to children with disabilities and administering care procedures for children with disabilities.
- 16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice).
- 17. Food and dietary policy, including information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals, and snacks and policy on providing supplemental food.
- 18. Management of illness including isolation precautions, symptoms for discharge and return, notification of parent of ill child and whether or not the provider will care for sick children.
- 19. Summary of procedures taken in the event of an emergency, serious illness or injury.
- 20. Administration of medication and topical products policy, medical foods, modified diets, and whether school age children are permitted to carry their own medical and ointments.
- 21. Transportation policy for field trips, routine walks, if applicable, and emergencies including if the provider will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.

- 22. Water activities/swimming.
- 23. Infant care, if applicable, including feeding, frequency of diaper checks, and information about daily activities.
- 24. Sleeping, napping and resting.
- 25. Evening and overnight care, if applicable.
- 26. Policy on hours of operation, closing due to weather, school delays or closings and any other factors.
- 27. Use of a substitute child care staff member or child care staff member pursuant to 5101:2-13-08 of the Administrative Code for sick days, vacations or other time off.
- 28. Situations that may require disenrollment of a child, if applicable.
- 29. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the family child care home.
- 30. Formal screenings and assessments conducted on enrolled children and if the program reports child level data to ODJFS pursuant to Chapter 5101:2-17 of the Administrative Code.

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

Corrective Action Plan Due: 05/25/2023

## **Rules In-Compliance/Not Verified**

| Rule                              | Status    | Documenting Statement(s), If applicable |
|-----------------------------------|-----------|---|
| 5101:2-13-02 License Visible      | Compliant |   |
| 310112 10 02 21001130 1131310     |           |   |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary  | Compliant |   |
| Closure                           |           |   |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location   | Compliant |   |
|                                   |           |   |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant |   |
|                                   |           |   |
|                                   | 1         |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable |

| Desirrons:                            | I a       | <del> </del>                              |
|---------------------------------------|-----------|---|
| 5101:2-13-02 Provider Medical         | Compliant |   |
|                                       |           |   |
|                                       |           |   |
|                                       |           | 1   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-03 Inspection               | Compliant |   |
| Requirements                          |           |   |
| ·                                     |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-04 Building Requirements    | Compliant |   |
| for Type B Homes                      |           |   |
| Tot Type Billiones                    |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-04 Fire Safety for Type B   | Compliant | (o), appa                                 |
| Homes                                 |           |   |
| Homes                                 |           |   |
|                                       | I .       | <u>I</u>                                  |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-04 Flammable and            |           | bocamenting statement(s), if applicable   |
|                                       | Compliant |   |
| Combustible Materials in a Type B     |           |   |
| Home                                  |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-04 Heaters in a Type B      | Compliant |   |
| Home                                  |           |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-05 Denial, Revocation, and  | Compliant |   |
| Suspension                            |           |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-07 Staff Records            | Compliant |   |
|                                       |           |   |
|                                       |           |   |
|                                       | 1         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-13-07 Type B Provider - Foster | Compliant | 2 commenting ottatement(s), it applicable |
| Parent                                | Compilant |   |
| Falelit                               |           |   |
|                                       | <u> </u>  |   |
| Rule                                  | Status    | Documenting Statement(s) If applicable    |
|                                       |           | Documenting Statement(s), If applicable   |
| 5101:2-13-08 Employee Requirements    | Compliant |   |
|                                       |           |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |

| 5101:2-13-08 Child Care Staff<br>Requirements | Compliant           |  |
|---|---------------------|--|
| Rule  | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-08 Whistle Blower                   | Compliant           | bocumenting statement(s), if applicable  |
| Pulo  | Ctatus              | Decumenting Statement(s) If applicable   |
| Rule 5101:2-13-09 Background Checks           | Status<br>Compliant | Documenting Statement(s), If applicable  |
|   |                     |  |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-10 Health Training                  | Compliant           | bookinenting statement(s), it applicable |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-10 Professional<br>Development      | Compliant           |  |
| Rule  | Status              | Decumenting Statement(s) If applicable   |
| 5101:2-13-11 Outdoor Space                    | Compliant           | Documenting Statement(s), If applicable  |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-11 Outdoor Equipment                | Compliant           |  |
|   |                     |  |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-11 Fall Zone                        | Compliant           |  |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-12 Safe Equipment                   | Compliant           | boddinenting statement(s), it applicable |
|   |                     |  |
| Rule 5101:2-13-13 Clean environment and       | Status<br>Compliant | Documenting Statement(s), If applicable  |
| equipment                                     | Compilant           |  |
| Pula  | Chahua              | Documenting Chatagories (1) 15           |
| Rule 5101:2-13-13 Handwashing                 | Status<br>Compliant | Documenting Statement(s), If applicable  |
| JIOI.Z IJ IJ Handwashing                      | Compliant           |  |

| Rule         Status         Documenting Statement(s), If applicable           St01:2-13-13 Smoke Free         Compliant           Rule         Status         Documenting Statement(s), If applicable           5101:2-13-13 Toothbrushing         Compliant           Rule         Status         Documenting Statement(s), If applicable           5101:2-13-14 Requirements for Field and Routine Trips         Compliant           Rule         Status         Documenting Statement(s), If applicable           5101:2-13-14 Ratio and Supervision for Field and Routine Trips         Compliant           Rule         Status         Documenting Statement(s), If applicable           5101:2-13-14 Driver Requirements         Compliant           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           Rule         Status         Documenting Statement(s), If applicable           Fulliance         Status         Documenting Statement(s), If applicable |                                     |           |   |
|--|-------------------------------------|-----------|---|
| Rule   Status   Documenting Statement(s), If applicable  |                                     |           |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  Status-Status Documenting Statement(s), If applicable  Status-Status-Statement(s), If applicable  Status-Statement(s), If applicable  Statement(s), If applicable  | Rule                                | Status    | 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  |                                     |           |   |
| Rule   Status   Documenting Statement(s), If applicable  |                                     |           |   |
| Rule   Status   Documenting Statement(s), If applicable  | Rule                                | Status    | Documenting Statement(s), If applicable |
| Status   Documenting Statement(s), If applicable   | 5101:2-13-13 Toothbrushing          | Compliant |   |
| Status   Documenting Statement(s), If applicable   |                                     |           |   |
| Status   Documenting Statement(s), If applicable   |                                     |           |   |
| Status   Documenting Statement(s), If applicable   | Rule                                | Status    | Documenting Statement(s), If applicable |
| Rule  Status  Compliant  Rule  Status  Documenting Statement(s), If applicable  Status  Documenting Statement(s), If applicable  Status  | 5101:2-13-14 Requirements for Field | Compliant |   |
| Status   Documenting Statement(s), If applicable   | and Routine Trips                   |           |   |
| Status   Documenting Statement(s), If applicable   |                                     |           |   |
| Status   Documenting Statement(s), If applicable   | Rule                                | Status    | Documenting Statement(s), If applicable |
| Rule       Status       Documenting Statement(s), If applicable         5101:2-13-14 Driver Requirements       Compliant         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         Rule       Status       Documenting Statement(s), If applicable         5101:2-13-15 Child Medical and       Compliant   | 5101:2-13-14 Ratio and Supervision  | Compliant | J , , , , , , ,                         |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Compliant  | for Field and Routine Trips         |           |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Compliant  |                                     |           |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Compliant  | Rule                                | Status    | Documenting Statement(s). If applicable |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-14 Vehicle Requirements Compliant  Rule Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant  |                                     |           | 3                                       |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-14 Vehicle Requirements Compliant  Rule Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant  |                                     |           |   |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-14 Vehicle Requirements Compliant  Rule Status Documenting Statement(s), If applicable Documenting Statement(s), If applicable Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant   |                                     |           |   |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-14 Vehicle Requirements Compliant  Rule Status Documenting Statement(s), If applicable Documenting Statement(s), If applicable Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant   | Rule                                | Status    | Documenting Statement(s), If applicable |
| Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant  | 5101:2-13-14 Vehicle Inspections    |           | 3 (" 11                                 |
| Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant  |                                     |           |   |
| Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant  |                                     |           |   |
| Status Documenting Statement(s), If applicable 5101:2-13-15 Child Medical and Compliant  | Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Medical and Compliant   | 5101:2-13-14 Vehicle Requirements   | Compliant | J , , , , , , ,                         |
| 5101:2-13-15 Child Medical and Compliant   |                                     |           |   |
| 5101:2-13-15 Child Medical and Compliant   |                                     |           |   |
| 5101:2-13-15 Child Medical and Compliant   | Rule                                | Status    | Documenting Statement(s), If applicable |
| Enrollment Records   | 5101:2-13-15 Child Medical and      |           |   |
|  | Enrollment Records                  |           |   |
|  |                                     |           |   |
| Rule Status Documenting Statement(s), If applicable  | Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions Compliant   |                                     |           | 0 1477 - 147F - 144 - 1                 |
|  |                                     |           |   |
|  |                                     |           |   |
| Rule Status Documenting Statement(s), If applicable  | Rule                                | Status    | Documenting Statement(s). If applicable |
| 5101:2-13-15 Child Records Retention Compliant   |                                     |           |   |
| and Confidentiality  | and Confidentiality                 |           |   |

| oestrand.                           |           |  |
|-------------------------------------|-----------|--|
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
|                                     |           | Bocumenting statement(3), if applicable  |
| 5101:2-13-16 Emergency Drills       | Compliant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
|                                     |           | Bocamenting statement(s), it applicable  |
| 5101:2-13-16 First Aid Kit/Standard | Compliant |  |
| Precautions                         |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
|                                     |           | Bootimenting statement(s)) in applicable |
| 5101:2-13-16 Incident/Injury        | Compliant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-16 Disaster Plan          | Compliant |  |
| 3101.2-13-10 Disaster Flair         | Compilant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-18 Attendance             |           |  |
| 5101.2-15-16 Attenuance             | Compliant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-19 Supervision            | Compliant | 0  |
| 3101.2-13-13 Supervision            | Compliant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-19 School Age Supervision | Compliant | 5 (", ")                                 |
| 3101.2-13-13 School Age Supervision | Compliant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-19 Child Guidance         | Compliant | 0 ("                                     |
| 5101.2 15 15 child daluance         | Compilant |  |
|                                     |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-20 Sleep and Nap          | Compliant |  |
|                                     | Compilant |  |
| Requirements                        |           |  |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-13-20 Crib and Playpen       | Compliant |  |
|                                     | Compilant |  |
| Requirements                        |           |  |
|                                     |           |  |

| 2.1                                 | T 61 1              |  |
|-------------------------------------|---------------------|--|
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-21 Evening and Overnight  | Compliant           |  |
| Care                                |                     |  |
|                                     |                     |  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
|                                     | Status<br>Compliant | Documenting Statement(s), if applicable  |
| 5101:2-13-21 Sanitary Environment   | Compilant           |  |
| and Hygiene                         |                     |  |
|                                     |                     |  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-22 Meals and Snacks       | Compliant           | bocamenting statement(s), it applicable  |
| 3101.2-13-22 Weals and Shacks       | Compliant           |  |
|                                     |                     |  |
| L                                   |                     |  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-22 Fluid Milk             | Compliant           | 2 common of contract (o), it approaches  |
| STOTIZ IS ZZ Hala Wilk              | Compliant           |  |
|                                     |                     |  |
|                                     |                     |  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-22 Food Handling          | Compliant           |  |
| 310112 13 12 1 000 11011011119      | Compilant           |  |
|                                     |                     |  |
|                                     |                     |  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-23 Infant Daily Care      | Compliant           | (-), -), -), -), -), -), -), -), -), -), |
|                                     | - Compilant         |  |
|                                     |                     |  |
|                                     |                     |  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-23 Infant Bottle and Food | Compliant           | 3 (7 11                                  |
| Preparation                         |                     |  |
| T reparation                        |                     |  |
|                                     |                     |  |
| 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  | Compliant           |  |
| Swimming                            | ,                   |  |
|                                     |                     |  |
|                                     |                     |  |
| Rule                                | Status              | Documenting Statement(s), If applicable  |
| 5101:2-13-25 Medication             | Compliant           |  |
| Requirements                        | '                   |  |
|                                     |                     |  |
|                                     |                     |  |

| Rule Status Documenting Statement(s), If applicable Status Documenting Statement(s), If applicable Status Status Documenting Statement Status Documenting Statement Status Documenting Statement Status Do | Rule                                   | Status      | Documenting Statement(s), If applicable |
|--|--|-------------|---|
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable  |  |             | bocumenting statement(3), if applicable |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  | 3101.2-13-07 Flovider Responsibilities | Compliant   |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  |  |             |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  |  | <u> </u>    | <u> </u>                                |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  | Rule                                   | Status      | Documenting Statement(s) If applicable  |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Status Documenting Statement(s), If applicable   |  |             |   |
| Status   Documenting Statement(s), If applicable   | 3101.2 13 10 Group Size and Ratios     | Compilation |   |
| Status   Documenting Statement(s), If applicable   |  |             |   |
| Status   Documenting Statement(s), If applicable   |  |             |   |
| Status   Documenting Statement(s), If applicable   | Rule                                   | Status      | Documenting Statement(s), If applicable |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Compliant  | 5101:2-13-12 Carbon Monoxide           |             | 3 (" 11                                 |
| Rule  Status  Compliant  Documenting Statement(s), If applicable  Status  Compliant   |  |             |   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  | The Bolling                            |             |   |
| Rule Status Documenting Statement(s), If applicable  Status Compliant  |  |             |   |
| Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable   | Rule                                   | Status      | Documenting Statement(s), If applicable |
| Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable   | 5101:2-13-11 Indoor Space              | Compliant   |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Compliant  | ·                                      | ·           |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Compliant  |  |             |   |
| Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Rule Status Documenting Statement(s), If applicable  Compliant  |  |             |   |
| Rule Status Documenting Statement(s), If applicable    Status   Documenting Statement(s), If applicable  | Rule                                   | Status      | Documenting Statement(s), If applicable |
| Rule Status Documenting Statement(s), If applicable Compliant   | 5101:2-13-17 Programming               | Compliant   |   |
| Rule Status Documenting Statement(s), If applicable Compliant   |  |             |   |
| Rule Status Documenting Statement(s), If applicable Compliant   |  |             |   |
| Rule Status Documenting Statement(s), If applicable Compliant   |  |             |   |
| 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  |  |             | Documenting Statement(s), If applicable |
| Status Documenting Statement(s), If applicable 5101:2-13-17 Materials and Compliant  | 5101:2-13-24 On-site Pools             | Compliant   |   |
| Status Documenting Statement(s), If applicable 5101:2-13-17 Materials and Compliant  |  |             |   |
| Status Documenting Statement(s), If applicable 5101:2-13-17 Materials and Compliant  |  |             |   |
| Status Documenting Statement(s), If applicable 5101:2-13-17 Materials and Compliant  |  | T -         |   |
| Rule Status Documenting Statement(s), If applicable 5101:2-13-17 Materials and Compliant   |  |             | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and Compliant   | 5101:2-13-24 Swimming Sites            | Compliant   |   |
| 5101:2-13-17 Materials and Compliant   |  |             |   |
| 5101:2-13-17 Materials and Compliant   |  |             |   |
| 5101:2-13-17 Materials and Compliant   | 2.1                                    | l c         | 2 ()                                    |
|  |  |             | Documenting Statement(s), if applicable |
| Equipment  |  | Compliant   |   |
|  | Equipment                              |             |   |
|  |  |             |   |
|  |  |             |   |