



## 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 QUINN, ALIESHA	Program Number 000000993953333	Program Type FCC - Type B Home
Address 1359 W. 61ST STREET  CLEVELAND OH 44102	County CUYAHOGA	

Inspection Information				
Inspection Type Compliance		Inspection Scope Full		Inspection Notice Unannounced
Inspection Date 03/23/2023		Begin Time 11:25 AM		End Time 2:22 PM
Reviewer: Renee Darling				
Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 19		No. Serious Risk 0	No. Moderate Risk 2
			No. Low Risk 25	

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)		1	0	1
Young Toddler		1	0	1
<b>Total Under 2 Years</b>	3	2	0	2
Older Toddler		2	0	2
Preschool		0	0	0
School Age		6	0	6
<b>Total Capacity/Enrollment</b>	6	8	0	10

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

##### Domain: 00 License & Approvals

Rule: 5101:2-13-04 Building Requirements for Type B Homes

Code: The program is required to only provide child care for children in spaces that are approved by the county agency prior to use.

Findings: During the inspection, it was determined the program was using space for child care in a manner that was not inspected and approved by the the county agency as noted in numbers 1 & 2 below:

1. The second floor bedroom or space was not approved prior to use.
2. The program did not notify the county agency in OCLQS prior to utilizing or structurally modifying any space not previously inspected.

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

Corrective Action Plan Due: 04/23/2023

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

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to protect children from any items and conditions which 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 the program did not protect children from an unsafe item or condition or equipment due to the following number 15 below:

1. Pull cord(s) on the window blind(s).
2. Extension cord(s); electrical cord(s) attached to an object that could result in a severe injury if pulled.
3. Stacked tables.
4. Folding tables.
5. Matches and/or a lighter.
6. Power tool(s).
7. Live wires.
8. Stove(s) that are either on or able to be turned on by a child.
9. Asbestos.
10. Traffic.
11. A body of water.
12. A well.
13. Environmental hazard(s) confirmed by local authorities having jurisdiction over the hazard.
14. A crockpot used to heat bottles.
15. Immediate access to a knife.
16. Large or heavy pieces of shelving units are not securely anchored to the wall.
17. Other [ ].

Any hazardous equipment must be removed, replaced, or repaired and any hazardous condition must be corrected and must be made inaccessible to children. Provide staff training. Submit the program's corrective action plan, which includes a statement that the item or condition has been removed and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/23/2023

### Low Risk Non-Compliances

#### Domain: 00 License & Approvals

Rule: 5101:2-13-02 Information in OCLQS

Code: The provider is required to keep their information current in OCLQS.

Findings: During the inspection, it was determined the information in number 4 below was not up to date in the Ohio Child Care Licensing and Quality System:

1. Mailing Address;
2. Telephone Number;
3. Email Address;



4. Days and Hours of Operation;
5. Services Offered;
6. Name of Program, If applicable.
7. Private pay rates.

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

Corrective Action Plan Due: 04/23/2023

#### **Domain: 01 Ratio & Supervision**

Rule: 5101:2-13-18 Attendance

Code: The program is required to have a tracking method for children.

Findings: During the inspection, it was determined that the method for tracking the children in the group did not meet the requirements in rule as noted in the number 1 below:

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

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

Corrective Action Plan Due: 04/23/2023

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

Rule: 5101:2-13-12 Safe Environment

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

Findings: During the inspection, it was determined that surge protectors or outlets did not have childproof receptacle covers. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/23/2023

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

Rule: 5101:2-13-12 Safe Environment





Code: The program is required to protect children in care from items and conditions that 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 number(s) [ ] below:

1. Telephone cords;
2. Stacked chairs;
3. Employee(s) purse(s);
4. Diaper bags;
5. Television not securely anchored;
6. Small or lightweight pieces of shelving units are not securely anchored to the wall;
7. Staff member stepped over a barrier/gate while holding a child;
8. Chipping or peeling paint;
9. Other - A inhaler and medication for one of your children, was present in a room upstairs on a TV stand, next door where you use another room for childcare.

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

Corrective Action Plan Due: 04/23/2023

## 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, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in number(s) [ ] 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 substance Mouthwash, Rubbing Alcohol and Medication stored in both bathrooms used for childcare.

The potentially hazardous substance was determined to be accessible to children in the following area: Both Bathrooms



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

Corrective Action Plan Due: 04/23/2023

**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 JFS 01201 "Dental First Aid" was not completed/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: 04/23/2023

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-17 Materials and Equipment

Code: The program is required to have play materials accessible.

Findings: During the inspection, it was determined that play materials were not accessible/orderly for the following reason(s) as noted in number(s) [ ] below:

1. Play materials were not readily accessible to the children;
2. Play materials were not arranged in an orderly manner so that children have opportunities to select, remove and replace play materials with minimal assistance during the day.

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

Corrective Action Plan Due: 04/23/2023

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-17 Materials and Equipment

Code: The program is required to have sufficient equipment and materials.

Findings: During the inspection, it was determined that equipment and materials in the following categories were not provided in sufficient quantities, as required 1, 2, 3, 5, 7, 8, 9, 10 below.



1. Art supplies (excludes infants);
2. Manipulative materials and equipment;
3. Blocks;
4. Science-nature equipment (excludes infants);
5. Language arts and auditory materials and equipment;
6. Pretend or dramatic play materials;
7. Music equipment;
8. Transportation materials and equipment;
9. Gross motor equipment;
10. Sensory motor equipment.

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

Corrective Action Plan Due: 04/23/2023

#### **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. No Daily Schedule

Corrective Action Plan Due: 04/23/2023

#### **Domain: 03 Postings & Equipment**

Rule: 5101:2-13-17 Materials and Equipment

Code: The program is required to provide equipment, materials, and furnishings for indoor and outdoor play.

Findings: During the inspection, it was determined that equipment, materials and furnishings provided for indoor and outdoor play did not meet the requirement of the rule as noted in numbers 1 & 2 below.

1. Not varied and adequate to meet the developmental needs of the children.
2. Not sufficient that each child can be actively involved in an activity.

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

Corrective Action Plan Due: 04/23/2023



### 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 1 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 in 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: 04/23/2023

### Domain: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather alert plan with a diagram.

Findings: During the inspection, it was determined the following information was not posted for item numbers 1 & 3 below:

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

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

Corrective Action Plan Due: 04/23/2023





**Domain: 05 Health & Safety**

Rule: 5101:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 3 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

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

Corrective Action Plan Due: 04/23/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item numbers 1, 2, 3 below:

1. Monthly fire drills
2. Monthly weather emergency drills (March through September)
3. Emergency/lockdown drills in each quarter of the calendar year

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

Corrective Action Plan Due: 04/23/2023

**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 4 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: 04/23/2023

### Domain: 05 Health & Safety

Rule: 5101:2-13-16 Disaster Plan

Code: The program is required to have a completed written disaster plan.

Findings: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number 1 below:

Procedures:

1. The written disaster plan had not been completed
2. The plan was not provided to all child care staff and employees
3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
6. Outbreaks, epidemics or other infectious disease emergencies
7. Loss of power, water, or heat
8. Other threatening situations that may pose a health or safety hazard to the children in the program

Details:

9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
10. Assisting infants and children with special needs and/or health conditions
11. Emergency contact information for parents and the program
12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
13. Procedures for communicating with parents during loss of communications, no phone or internet service available
14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
16. Making the plan available to all child care staff members and employees
17. Training of staff or reassignment of staff duties as appropriate
18. Updating the plan on a yearly basis
19. Contact with local emergency management officials

Add the missing information to the disaster plan. Submit the program's corrective action plan, which includes the missing information, to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 04/23/2023

**Domain: 06 Program Information**

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

Code: The program is required to have written parental permission for trips on file.

Findings: During the inspection, it was determined that written parental permission was not secured for field trips and/or routine trips off the premises or out of the areas approved for child care, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/31/2023

**Domain: 07 Diapering & Infant Care**

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

Code: The program is required to ensure that each mattress has a properly fitted sheet.

Findings: During the inspection, it was determined that sheets did not meet the rule requirement as noted in number 1 below

1. At least one crib or playpen did not have a sheet.
2. At least one sheet was too large.
3. At least one sheet was too small.
4. Sheet was torn.

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

Corrective Action Plan Due: 04/23/2023

**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 numbers 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: 04/23/2023

#### 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 10 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.
11. Other: []
- Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/27/2023

#### 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: 05/12/2023

#### Domain: 08 Staff Files

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

Code: The program staff is required to complete the prescribed orientation within 30 days of starting employment.

Findings: In review of the staff records, it was determined that the child care staff member or substitute child care staff member had not completed the online orientation training as noted in number 2 below:

1. The training was not completed within thirty days of the starting employment.
2. There was no documentation of completing the training after December 31, 2016.
3. Completion of training is not documented with verification from the OPR for the Child Care Staff Member(s) and/or Substitute 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: 04/23/2023



**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 numbers 8, 10, 11, 13, 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. Other- Enrollment forms for more than five children was not signed by the administrator and three of the children had no enrollment forms.

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

Corrective Action Plan Due: 04/23/2023

**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 7 & 11 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 Information not on the prescribed form

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

Corrective Action Plan Due: 04/23/2023

#### Domain: 10 Written Policies & Procedures

Rule: 5101:2-13 Written Policies and Procedures

Code: The provider is required to create, maintain, and implement the policies and procedures outlined in appendix C of this rule.

Findings: It was determined the provider was not responsible for creating, maintaining or implementing the policies and procedures detailed in appendix C of 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: 04/23/2023

#### 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	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 Provider Medical	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Safety for Type B Homes	Compliant	
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 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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional Development	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	
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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
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	



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
5101:2-13-15 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention and Confidentiality	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	



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 Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Sanitary Environment and Hygiene	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Fluid Milk	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food Preparation	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 Detectors - Type B Only	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 On-site Pools	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	