



## 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 Jonneka Meek	Program Number 2170015194	Program Type FCC - Type B Home
Address 1396 weybridge rd  Columbus OH 43220		County FRANKLIN

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 12/07/2022	Begin Time 9:30 AM	End Time 12:00 PM
Reviewer: Angela Staso		

Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 19	No. Serious Risk 0	No. Moderate Risk 4	No. Low Risk 22

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)	3	2	0	2
Young Toddler		0	0	0
<b>Total Under 2 Years</b>		2	0	2
Older Toddler	6	0	0	0
Preschool		2	0	2
School Age		16	0	16
<b>Total Capacity/Enrollment</b>	6	18	0	20

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

##### Domain: 00 License & Approvals

Rule: 5101:2-13-04 Flammable and Combustible Materials in a Type B Home

Code: The program is required to properly store flammable and combustible materials and substances.

Findings: During the inspection, it was determined flammable and combustible materials and substances were stored near number 2 & 3 below:

1. Heater;
2. Furnace;
3. Water Heater;
4. Gas Appliance.

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

Corrective Action Plan Due: 01/06/2023

##### 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 due to the following number 5 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: 01/06/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing potentially hazardous items, toxic substances, and outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item and toxic substance was stored where children present had access to it as noted in numbers 2, 9, & 14 below. The potentially hazardous substance and item that posed a risk to children was determined to be accessible to children in the carport, upstairs bathroom, downstairs bathroom, inside of the car, & upstairs hallway closet.

1. Bleach.
2. Cleaning agent.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.



6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.
14. Other potentially hazardous substance, equipment or machinery: leaf blower in carport.

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

Corrective Action Plan Due: 01/06/2023

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Outdoor Space

Code: The program is required to have an outdoor play space free from immediate risk.

Findings: During the inspection, it was determined that an area was used which was not protected from traffic by a fence in good condition, or other barrier, that assured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number 1 below:

1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
2. The fencing had missing slat boards through which children could leave the playground.
3. The gate was broken and did not close.
4. The latch on the gate was broken.
5. The gate had no latch.
6. The fencing was broken.
7. The latch was easily opened by children on the playground.
8. The portable fencing approved for use by the Department was not being used.
9. The fencing was rotting.
10. The fencing was loose.
11. Other [ ].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a fence or other barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/06/2023



### 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 5/12/22. 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: 01/06/2023

**Domain: 00 License & Approvals**

Rule: 5101:2-13-02 Provider Medical

Code: The provider is required to submit a complete and valid medical statement.

Findings: In review of the staff records, it was determined that the medical statement for the provider did not include the required information listed below in numbers 1, 2, & 3, :

1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that the employee is:
  - a. Physically fit for employment as a provider caring for children;
  - b. Immunized against Measles, Mumps, and Rubella (MMR).
  - c. Immunized against tetanus, diphtheria and pertussis (Tdap).

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

Corrective Action Plan Due: 01/06/2023



**Domain: 01 Ratio & Supervision**

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain attendance records.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 1 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The original attendance documentation was not kept at the program for a period of one year.

Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/06/2023

**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: 01/06/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-13 Clean environment and equipment

Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following number 5 & 6 below, were in the downstairs and upstairs restrooms:

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: 01/06/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-13 Toothbrushing

Code: The program is required to label each child's toothbrush.

Findings: During the inspection, it was determined that toothbrushes were not labeled with the child's name. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/06/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to remove toys or other items that may be a choking hazard from infants and toddlers.

Findings: During the inspection, it was determined there were toys or other items, small enough to be swallowed, present in the space where infants or toddlers were in care. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 01/06/2023

**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 outlets did not have childproof receptacle covers in the program area. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 01/06/2023

**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 condition which may threaten their safety and well being as noted in the following number 5 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 [ ].

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

Corrective Action Plan Due: 01/06/2023

**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 inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in numbers 1, 2, 4, 5, & 6 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 [ ]

The potentially hazardous substance was determined to be accessible to children in the following areas: downstairs bathroom, kitchen, upstairs bathroom, & main program space.

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

Corrective Action Plan Due: 01/06/2023

**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 were not on file. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/06/2023

**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 numbers 1 & 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 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: 01/06/2023

**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: 01/06/2023

**Domain: 03 Postings & Equipment**

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

Code: The program is required to provide a designated storage area for children's personal belongings.

Findings: During the inspection, it was determined that the provider did not have designated storage areas for children's personal belongings, in that the children did not have designated spaces for their personal toothbrushes & washcloths. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 01/06/2023

**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: 01/06/2023

**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 and in the vehicle as required, that included all items listed in the appendix A of the rule. The kit was missing the items listed in numbers 5, 8, 15, & 16 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: 01/06/2023



**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 numbers 1 & 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.
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: 01/06/2023

**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 performed or 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: 01/06/2023

**Domain: 07 Diapering & Infant Care**

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

Code: The program staff is required to have all bottles labeled.

Findings: During the inspection, it was determined that bottles containing milk/ or formula for a particular infant were not labeled with the child's name and date of preparation. Submit the program's corrective action plan to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 01/06/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to have hours of availability to meet with parents posted in a noticeable place.

Findings: During the inspection, it was determined that the provider did not have hours of availability to meet with parents in 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: 01/06/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-09 Background Checks

Code: Individuals are required to completed the background check process and obtain complete results.

Findings: In review of the staff records, it was determined that background check requirements were incomplete for the individuals listed on the Employee Record Chart, as noted in number 1 below:

1. The JFS 01176 "Program Notification of Background check Review for Child Care" was not on file at the program, but was on file at the county agency and the individual is eligible.
2. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the program and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.
3. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the county agency and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/06/2023

**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 1 below:



1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions
11. Other [ ]

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

Corrective Action Plan Due: 01/06/2023

**Rules In-Compliance/Not Verified**

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



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	
5101:2-13-04 Building Requirements for Type B Homes	Compliant	
5101:2-13-04 Fire Safety for Type B Homes	Compliant	
5101:2-13-04 Heaters in a Type B Home	Compliant	
5101:2-13-07 Staff Records	Compliant	
5101:2-13-07 Type B Provider - Foster Parent	Compliant	
5101:2-13-08 Employee Requirements	Compliant	
5101:2-13-08 Child Care Staff Requirements	Compliant	
5101:2-13-08 Whistle Blower	Compliant	
5101:2-13-10 Health Training	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 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 Handwashing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 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 Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable





5101:2-13-15 Health Conditions	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-15 Child Records Retention and Confidentiality	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-16 Incident/Injury	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-16 Disaster Plan	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-19 Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-19 School Age Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-19 Child Guidance	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-20 Sleep and Nap Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-20 Crib and Playpen Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-21 Evening and Overnight Care	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>



5101:2-13-21 Sanitary Environment and Hygiene	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-22 Meals and Snacks	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-22 Fluid Milk	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-22 Food Handling	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-23 Infant Daily Care	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-23 Diapering	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-24 Parent Permission for Swimming	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-25 Medication Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-18 Group Size and Ratios	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13 Written Policies and Procedures	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>



5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-11 Indoor Space	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-17 Programming	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-24 On-site Pools	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-24 Swimming Sites	Compliant	