



Center 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 Backyard Beginnings Learning Center LLC	Program Number 2170016629	Program Type Child Care Center	
Address 2627 Atlantic Street NE Warren OH 44483		County TRUMBULL	
Building Approval Date 03/24/2020	Use Group/Code E	Occupancy Limit 1028	Maximum Under 2 ½
Fire Inspection Approval Date 09/28/2022	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 12/20/2022	Begin Time 12:15 PM	End Time 3:42 PM
Reviewer: REBECCA KOTEWICZ		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 14	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 15

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)		6	0	6
Young Toddler		5	0	5
Total Under 2 ½ Years	26	11	0	11
Older Toddler		13	0	13
Preschool		9	0	9
School Age		0	14	14
Total Capacity/Enrollment	66	22	14	47

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



Infants	0 to < 12 months	2 to 5	
Infants	0 to < 12 months	1 to 5	
Older tots Young PS	30 months to < 36 months	1 to 8	
Older tots Young PS	30 months to < 36 months	2 to 12	Nap. Older tots, PS and PK combined
PK	3 years to < 4 years	1 to 4	
SA	School-Age to < 11 years	1 to 8	Arrival from school
Toddlers	18 months to < 30 months	1 to 7	
Toddlers	18 months to < 30 months	1 to 7	

Summary of Non-Compliances

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

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment
Code: The program is required to anchor equipment to the ground as required, to close "S" hooks to prevent the chain from slipping off and prevent strangulation and provide equipment with openings that will not pose a safety risk.

Finding: During the inspection, it was determined that equipment on the outdoor play space posed an imminent risk of harm to a child as noted in number(s) 4, 6 below:

1. The climber was not anchored.



2. The swings were not securely anchored.
3. The slide was not securely anchored.
4. The climbing rope was not securely anchored at both ends. Climbing rope was detached in 2 places.
5. The "S" hooks on the climber were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
6. The "S" hooks on the swing(s) were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
7. The [] had an opening that was greater than three and one-half inches, but less than nine inches. Equipment openings must be less than 3 1/2 inches or more than 9 inches to avoid the risk of entrapment.

Discontinue the use of this equipment until it has been removed, repaired or replaced. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/19/2023

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have staff update their background checks every five years as required.

Finding: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number(s) 1, 2, 3 below:

1. Owner
2. Administrator
3. Child care staff member, employee

Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/19/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the



children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/19/2023



Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 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: 01/19/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 4, 5 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 date of birth;
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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/19/2023



Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Materials and Equipment

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

Finding: During the inspection, it was determined that play materials were not accessible/orderly for the following reason(s) as noted in number(s) 1 below:

1. Play materials were not readily accessible to the children in the toddler classroom; art
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 in the [] classroom.

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment

Code: The program is required to provide equipment that does not pose a safety risk.

Finding: During the inspection, it was determined that outdoor play equipment was unsafe as noted in number(s) 6 below:

1. There was rust exposed;
2. There was protruding bolts;
3. There were cracks;
4. There were holes;
5. There was splintering wood;
6. There were sharp edges or points; 2 pointed and sharp screw eyes were accessible to the children on the rope climber.
7. There were lead hazards;
8. There were toxic substances;
9. There were tripping hazards;
10. There was chipped and/or peeling paint;
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: 01/19/2023



Domain: 05 Health & Safety

Rule: 5101:2-12-16 Management of Communicable Disease

Code: The program is required to post the JFS 08087 "Ohio Communicable Disease Chart".

Finding: During the inspection, it was determined that the JFS 08087 "Ohio Communicable Disease Chart" was not posted as required, as indicated in number(s) 3 below:

1. The chart was not posted.
2. In a location readily available to program staff and parents.
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.

Technical assistance was provided at the time of inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item number(s) 1 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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/19/2023



Domain: 08 Staff Files

Rule: 5101:2-12-10 Professional Development Requirements

Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number(s) 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
6. Other [].

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

Corrective Action Plan Due: 01/19/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

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

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 in a program caring for children;
 - b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
 - c. Immunized against Measles, Mumps, and Rubella (MMR);
4. Tuberculosis (TB) screening/test
 - a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;



- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

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

Corrective Action Plan Due: 01/19/2023

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2, 5, 6 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: []

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

Corrective Action Plan Due: 01/19/2023



Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training before they are permitted to have sole responsibility of children.

Finding: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/19/2023

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 2, 5, 10 below:

1. First Aid – child care staff members scheduled during the hours of [] and [] had expired training
2. First Aid – child care staff members scheduled during the hours of 5 and 6 did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [] and [] had expired training
5. CPR – child care staff scheduled during the hours of 5 and 6 had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [] and [] had expired training
10. Communicable Disease – child care staff scheduled during the hours of 5 and 6 had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [] and [] had expired training
13. Child Abuse – child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 01/19/2023

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Qualifications

Code: The program administrator is required to complete the rules course reiew within the defined time period.

Finding: During the inspection, it was determined that the administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in this rule. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2, 3, 5, 6 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/19/2023



Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .

Finding: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 2 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 []

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file at the program for each child enrolled.

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 1 below:



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

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

Corrective Action Plan Due: 01/19/2023

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: The following rooms were approved for children less than two and one-half years of age: 24, 25.
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: On the day of the inspection, the program was operating in compliance with the current building approval(s).
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 9/28/23.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: 9883278, March 1, 2023, Level III.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-11 Outdoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: The protective material used under outdoor equipment was pea gravel.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: The program uses the ODJFS sample trip permission form for routine trips to secure written permission from parents or guardians.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were placed appropriately and safely during nap time.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were labeled with the assigned infant's name.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Daily Care	Compliant	Documenting Statement: Appropriate daily written records for all infants were viewed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: Infants were fed in conformity with parent/guardian's written, dated instructions.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Diapering and Toilet Training	Compliant	Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the [infant/toddler] room(s).
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	