

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

|   | Program Deta            | nils            |     |                   |
|---|-------------------------|-----------------|-----|-------------------|
| Program Name                            | Program Number          |                 | Pro | gram Type         |
| Right At School at Fairbrook Elementary | 2190020152              |                 | Chi | ld Care Center    |
| School                                  |                         |                 |     |                   |
| Address                                 |                         |                 | Cou | unty              |
| 260 N. Fairfield Road Beavercreek       |                         |                 | GR  | EENE              |
| OH 45430                                |                         |                 |     |                   |
|   |                         |                 |     |                   |
|   |                         |                 |     |                   |
| Building Approval Date                  | Use Group/Code          | Occupancy Limit |     | Maximum Under 2 ½ |
|   |                         |                 |     |                   |
| Fire Inspection Approval Date           | Food Service Risk Level |                 |     |                   |
|   | Level IV                |                 |     |                   |

| Inspection Information |                                |                  |                   |              |  |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type        | Inspection Sc                  | cope             | Inspection Notice |              |  |
| Annual                 | Full                           |                  | Unannounced       |              |  |
| Inspection Date        | Begin Time 4                   | :15 PM           | End Time 6:00 PM  |              |  |
| 01/24/2023             |                                |                  |                   |              |  |
| Reviewer:              |                                |                  |                   |              |  |
| Steffani Roberts       |                                |                  |                   |              |  |
| Summary of Findings    |                                |                  |                   |              |  |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 58                     | 7                              | 0                | 4                 | 5            |  |

| Li                        | License Capacity and Enrollment at the Time of Inspection |            |           |       |  |
|---------------------------|---|------------|-----------|-------|--|
| Age Group                 | License Capacity  | Enrollment |           |       |  |
|                           | Totals  | Full Time  | Part Time | Total |  |
| Infant ( Birth to < 18 m) |   | 0          | 0         | 0     |  |
| Young Toddler             |   | 0          | 0         | 0     |  |
| Total Under 2 ½ Years     | 0   | 0          | 0         | 0     |  |
| Older Toddler             |   | 0          | 0         | 0     |  |
| Preschool                 |   | 0          | 0         | 0     |  |
| School Age                |   | 0          | 41        | 41    |  |
| Total Capacity/Enrollment | 74  | 0          | 41        | 41    |  |

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



| School Age | School-Age to < 11 years | 1 to 10 | @ Arrival |
|------------|--------------------------|---------|-----------|
| School Age | School-Age to < 11 years | 0 to 10 |           |
| School Age | School-Age to < 11 years | 1 to 5  |           |

### **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: 01 Ratio & Supervision

<u>Rule</u>: 5101:2-12-18 Ratio

<u>Code</u>: The program is required to have a second employee present, and used based on the qualifications they meet, when seven or more children are present.

<u>Finding</u>: During the inspection, it was determined that the program did not meet the rule requirement as noted in number 1 below:

1. The program did not have a second employee or Child Care Staff Member present when required;

2. The program was using a second Child Care Staff Member who was not able to meet this criteria as defined in the rule.

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

Corrective Action Plan Due: 02/24/2023



## Domain: 01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

<u>Code</u>: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

<u>Finding</u>: During the inspection, it was determined that children were left unattended while inside the program as noted in number 2 below:

- 1. Child(ren) were left unattended once.
- 2. Child(ren) were left unattended more than once.
- 3. Child(ren) left the group and were unattended.
- 4. Child care staff were using a baby monitor to supervise children.
- 5. Child care staff were using a walkie talkie to supervise children.
- 6. Child care staff were using mirrors to view children in another room.
- 7. Child care staff were using a video camera instead of physically being present in the room.

8. Other [ ].

Children must be supervised and within sight and hearing of a child care staff member at all times. Provide staff training. 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: 02/24/2023

# Domain: 01 Ratio & Supervision

<u>Rule</u>: 5101:2-12-18 Ratio

<u>Code</u>: The program is required to maintain the appropriate staff to child ratio for each group served.

<u>Finding</u>: During the inspection, a ratio of 0 child care staff member(s) for 10 children was determined to have occurred for the School Age group when the situation in number 1 below occurred:

- 1. A child care staff member stepped out of the room.
- 2. A child care staff member had not arrived at work on time.
- 3. Children were present who were not scheduled to be there.
- 4. A child care staff member was unable to work.
- 5. A child was injured in that group.
- 6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
- 7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.

8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.

9. Ratio was doubled for more than two hours while children were napping.



10. Ratio was doubled while children were napping for a group that included at least one infant.

11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.

12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.

13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.

14. The child care staff member did not return to the group after allowing access to the school age only program. 15. Other [].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. Provide staff training. 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: 02/24/2023

# Domain: 09 Children's Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 numbers 12,13 and 19 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: 02/24/2023

# Low Risk Non-Compliances

# Domain: 08 Staff Files

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

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

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 5 and 7 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: 02/24/2023

# Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to include all information.

<u>Finding</u>: 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 1.

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: 02/24/2023



## Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/24/2023

# Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 numbers 1 and 2 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: 02/24/2023



## Domain: 09 Children's Files

<u>Rule</u>: 5101:2-12-15 Child Medical and Enrollment Records <u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

<u>Finding</u>: 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 numbers 1,4,6 and 15 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.

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

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|---|



| Rule: 5101:2-12-02 License Posted    | Compliant | Documenting Statement: The license was<br>in a location visible to parents as<br>required. |
|--------------------------------------|-----------|--|
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-02 Current Information     | Compliant |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-03 Inspection              | Compliant |  |
| Requirements                         |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Building          | Compliant | Documenting Statement: This program  |
| Department Inspection                |           | serves only school age children in a public  |
|                                      |           | or chartered non-public school building.   |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Fire Inspection   | Compliant | Documenting Statement: This program  |
| Rule. 5101.2-12-04 The hispection    | Compliant | serves only school age children in a public  |
|                                      |           |  |
|                                      |           | or chartered non-public school building.   |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Food Service      | Compliant | Documenting Statement: During the  |
| Requirements                         | oon phane | inspection, the requirements of the rule   |
| negui entento                        |           | regarding food service license or  |
|                                      |           | exemption were discussed. Program  |
|                                      |           | needs to obtain a letter from the school   |
|                                      |           | allowing them to operate under the   |
|                                      |           | school's food license.   |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator           | Compliant |  |
| Qualifications                       |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-07 Written Program   | Compliant | Documenting Statement: The written   |
| Policies and Procedures              |           | policies and procedures reviewed on the  |
|                                      |           | day of the inspection were verified as   |
|                                      |           | complete.  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Child Care Staff Member | Compliant |  |
| Educational Requirements             |           |  |



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| Rule                                 | Status    | Documenting Statement(s), If applicable  |
|--------------------------------------|-----------|--|
| 5101:2-12-08 Orientation Training &  | Compliant |  |
| Whistle Blower Protection            |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check  | Compliant | Documenting Statement: During the        |
| Requirements                         |           | inspection, the required documentation   |
|                                      |           | regarding background checks was on file  |
|                                      |           | for all employees listed.                |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-10 Professional            | Compliant |  |
| Development Requirements             | Compliant |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space            | Compliant |  |
| Requirements                         |           |  |
|                                      |           | · · · · · · · · · · · · · · · · · · ·    |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Space     | Compliant | Documenting Statement: Outdoor play      |
| Requirements                         |           | was not observed due to weather          |
|                                      |           | conditions however, the quarterly        |
|                                      |           | playground inspections were discussed    |
|                                      |           | and documentation was on file, as        |
|                                      |           | required.                                |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Play      | Compliant | Documenting Statement: The outdoor       |
| Equipment                            | compliant | play space and equipment were not        |
| Equipment                            |           | viewed during this inspection due to sno |
|                                      |           | covering; however, the requirements      |
|                                      |           | were discussed.                          |
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: The protective    |
| Zones                                |           | surfaces under the outdoor equipment     |
|                                      |           | were not viewed during this inspection   |
|                                      |           | due to snow covering; however, the       |
|                                      |           | requirements were discussed.             |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-12 Safe Equipment    | Compliant | Documenting Statement: Equipment was     |
|                                      |           | observed to be in good condition.        |
|                                      |           |  |



| Rule                                  | Status    | Documenting Statement(s), If applicable   |
|---------------------------------------|-----------|---|
| Rule: 5101:2-12-12 Safe Environment   | Compliant | Documenting Statement: A safe   |
|                                       |           | environment was observed during the   |
|                                       |           | inspection. Children were protected from  |
|                                       |           | items and conditions which threaten their                                       |
|                                       |           | health, safety and well-being.  |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Sanitary           | Compliant | Documenting Statement(3), in applicable   |
| Equipment and Environment             | Compliant | inspection, the equipment was observed  |
|                                       |           | clean and in good repair.   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Handwashing              | Compliant |   |
| Requirements                          |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Smoke Free               | Compliant |   |
| Environment                           |           |   |
| Rule                                  | Status    | Documenting Statement(c) If applicable  |
| Rule: 5101:2-12-16 Medical, Dental,   |           | Documenting Statement(s), If applicable<br>Documenting Statement: On the day of |
|                                       | Compliant |   |
| and General Emergency Plan            |           | the inspection, the complete prescribed   |
|                                       |           | JFS 01242 "Medical, Dental, and General   |
|                                       |           | Emergency Plan For Child Care" were   |
|                                       |           | posted in the program as required.  |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills   | Compliant | Documenting Statement: Documentation  |
|                                       |           | for completed fire, weather, and  |
|                                       |           | emergency/lockdown drills was verified  |
|                                       |           | during this inspection.   |
|                                       | I         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the   |
| Precautions                           |           | inspection, the program had complete  |
|                                       |           | first aid kits available as required.   |
|                                       | 1         | I   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Management of            | Compliant |   |
| Communicable Disease                  |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
|                                       |           |   |



| 5101:2-12-16 Incident/Injury<br>Reporting | Compliant |   |
|---|-----------|---|
| Reporting                                 |           |   |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Written Disaster       | Compliant | Documenting Statement: The program's      |
| Plan                                      | compliant | written disaster plan was reviewed during |
|   |           | the inspection and met the requirements.  |
|   |           | the inspection and met the requirements.  |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Daily Schedule         | Compliant | Documenting Statement: Daily schedules    |
| Rule: 5101.2 12 17 Daily Schedule         | compliant | were observed posted.                     |
|   |           | were observed posted.                     |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Materials and                | Compliant |   |
| Equipment                                 |           |   |
|   | 1         |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Outdoor Play           | Compliant |   |
|   | compliant |   |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-18 License Capacity             | Compliant |   |
|   |           |   |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-18 Group Size                   | Compliant |   |
|   |           |   |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Attendance             | Compliant | Documenting Statement: Child Care Staff   |
| Records                                   |           | Members were observed recording the       |
|   |           | attendance for each child upon arrival    |
|   |           | and documenting each child's departure.   |
|   |           |   |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-19 Child Guidance         | Compliant | Documenting Statement: Appropriate        |
|   |           | child guidance techniques and practices   |
|   |           | were observed being used during the       |
|   |           | inspection.                               |
|   |           |   |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Meal and Snack               | Compliant |   |
| Requirements                              |           |   |
|   |           |   |
| Rule                                      | Status    | Documenting Statement(s), If applicable   |



Department of Education Department of Job and Family Services

| 5101:2-12-22 Fluid Milk Requirements | Compliant |   |
|--------------------------------------|-----------|---|
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food               | Compliant |   |
| Handling/Storage                     |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication              | Compliant |   |
| Administration                       |           |   |
|                                      |           |   |
|                                      |           |   |