

# **Family Child Care Licensing Inspection Full Report**

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details                       |                |                   |
|---------------------------------------|----------------|-------------------|
| Program Name                          | Program Number | Program Type      |
| Selene's School of Cognitive Thinking | 2220027290     | FCC - Type B Home |
| Learning Center                       |                |                   |
| Address                               |                | County            |
| 688 Glenwood Ave                      |                | HAMILTON          |
|                                       |                |                   |
| Cincinnati                            |                |                   |
| OH 45229                              |                |                   |

| Inspection Information |                                |                  |                   |              |  |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type        | Inspection So                  | cope             | Inspection Notice |              |  |
| Compliance             | Full                           | Full Unannounced |                   |              |  |
| Inspection Date        | Inspection Date Begin Time     |                  | End Time          | End Time     |  |
| 09/18/2025             | 12:24 PM                       | 12:24 PM         |                   | 1:40 PM      |  |
| Reviewer:              |                                |                  |                   |              |  |
| Amber Saulsbury        |                                |                  |                   |              |  |
| Summary of Findings    |                                |                  |                   |              |  |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 68                     | 9                              | 0                | 3                 | 8            |  |

| 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)                                  |                  | 2          | 0         | 2     |
| Young Toddler   |                  | 0          | 0         | 0     |
| Total Under 2 Years                                       | 3                | 2          | 0         | 2     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 1          | 0         | 1     |
| School Age  |                  | 3          | 0         | 3     |
| Total Capacity/Enrollment                                 | 6                | 4          | 0         | 6     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| 9/18/25                                      | Mixed Age Group | 1 to 2         |         |



#### **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 |  |  |
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### **Moderate Risk Non-Compliances**

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 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 or toxic substance was used or stored where children present had access to it as noted in number 7, 10 and 14 below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in [ back yard ].

- 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: [ propane fire pit and grill ].



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: 10/19/2025

#### Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to protect children from any items and conditions which threaten their health, safety, and well-being.

Findings: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined the program did not protect children from an unsafe item or condition or equipment due to the following number 15 below:

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

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: 10/19/2025

Domain: 09 Children's Files



Rule: 5180:2-13-25 Medication Requirements

Code: The program is required to store medication out of the reach of children.

Findings: During the inspection, it was determined medication was in the reach of children. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 10/19/2025

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

### **Domain: 00 License & Approvals**

Rule: 5180:2-13-04 Fire Safety for Type B Homes

Code: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Findings: During the inspection, it was determined that the Type B Home did not have a working smoke alarm [in the basement/on each level of the home] or smoke alarm(s) were not [placed/installed/tested/maintained] in accordance with manufacturer's recommendations. A working smoke alarm must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 10/19/2025

#### Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Findings: Children in care shall be protected from any items and conditions which threaten their health, safety, and well being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well being as noted in the following number 8 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers.
- 2. Open pull cords that are not closed loop.
- 3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.



- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Telephone cords.
- 7. Employee(s) purse(s).
- 8. Diaper bags.
- 9. Television not securely anchored.
- 10. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 11. Staff member stepped over a barrier/gate while holding a child.
- 12. Chipping or peeling paint.
- 13. An area rug did not have a nonskid backing.
- 14. An area rug presented a tripping hazard.
- 15. A floor surface was unsafe in that [].
- 16. No platform was provided for the sink or toilet.
- 17. The platform provided for the sink or toilet was not sturdy.
- 18. The platform provided for the sink or toilet posed a safety hazard in that [ ].
- 19. Emergency exits were blocked by the following furniture in that [ ].
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Other [ ].

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

Corrective Action Plan Due: 10/19/2025

### Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Pets

Code: The program is required to properly care for pets and prevent any threat to the safety or health of the children by the pet.

Findings: During the inspection, it was determined pets at the program were not properly housed or cared for or posed a threat to the safety or health of the children as noted in number 5 and 6 below:

- 1. The animal's cage was dirty with feces.
- 2. The aquarium was unclean.
- 3. The litter box was dirty with feces.
- 4. A pet posed a threat to the safety of a child in that [].
- 5. A pet requiring a license did not have a current license.
- 6. Proper inoculation records were not on file at the program for a pet requiring inoculations.
- 7. Children were exposed to the pet's urine and/or feces.
- 8. Other [ ].

A pet that poses a threat to the children shall not be at the program. All pets at the program must receive proper care and housing. Submit the program's corrective action plan to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 10/19/2025

#### Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-13 Clean environment and equipment

Code: The program is required to store trash outside of the areas approved for child care.

Findings: During the inspection, it was determined that accumulated trash or garbage was stored in an area approved for child care. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/19/2025

### Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-13-11 Outdoor Space

Code: The program staff is required to protect the children from hazardous conditions in the outdoor play area.

Findings: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number 3 below:

- 1. There was broken glass.
- 2. There were tall weeds.
- 3. There was poison ivy.
- 4. There were tree branches.
- 5. There was mold visible.
- 6. The sandbox was contaminated.
- 7. There were thistles with prickers.
- 8. There were bird droppings.
- 9. The outdoor area was littered with trash.
- 10. The trash can was missing a lid.
- 11. The trash was not emptied from the day(s) before.
- 12. The trash can was overflowing with trash.
- 13. The trash can was infested with insects.
- 14. The trash can was visibly dirty.
- 15. 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: 10/19/2025



Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number(s) 1 and 4 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of the completion of First Aid training
- 3. First Aid documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 4. CPR expired training
- 5. CPR had not taken CPR training
- 6. CPR did not have verification of the completion of CPR training
- 7. CPR training taken did not include all age groups and developmental levels of all children in care
- 8. CPR documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training
- 10. Communicable Disease expired training
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of CD training
- 13. Communicable Disease documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 14. Child Abuse expired training
- 15. Child Abuse had not taken Child Abuse training
- 16. Child Abuse documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

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

Corrective Action Plan Due: 10/19/2025

#### Domain: 08 Staff Files

Rule: 5180:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number 1.

- 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 verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/19/2025

#### Domain: 09 Children's Files

Rule: 5180:2-13-15 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: 10/19/2025



## Rules In-Compliance/Not Verified

| Rule                               | Status    | Documenting Statement(s), If applicable |
|------------------------------------|-----------|---|
| 5180:2-13-02 Voluntary Temporary   | Compliant |   |
| Closure                            |           |   |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 License Visible       | Compliant |   |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Change of Location    | Compliant | Documenting Statement(s), if applicable |
| 5180.2-13-02 Change of Location    | Compliant |   |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Information in OCLQS  | Compliant |   |
|                                    | ,         |   |
|                                    |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Provider Medical      | Compliant |   |
|                                    |           |   |
|                                    |           |   |
| P. I.                              |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-03 Inspection            | Compliant |   |
| Requirements                       |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Building Requirements | Compliant |   |
| for Type B Homes                   |           |   |
| /possitioning                      |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Flammable and         | Compliant |   |
| Combustible Materials in a Type B  |           |   |
| Home                               |           |   |
|                                    | •         |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Heaters in a Type B   | Compliant |   |
| Home                               | ,         |   |
| Cymreness organicals               |           |   |
|                                    |           |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-07 Staff Records         | Compliant |   |



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| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13-07 Provider Responsibilities  | Compliant  |  |
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| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13 Written Policies and  | Compliant  | bocamenting statement(3), it applicable  |
| 1   | Compliant  |  |
| Procedures  |  |  |
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| Post los  |  |  |
| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13-07 Type B Provider - Foster   | Compliant  |  |
| Parent  |  |  |
|   |  |  |
|   |  |  |
| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13-08 Employee Requirements  | Compliant  |  |
| State and county in the Search Memory Process Process (Application of Patients) and state and the | Total Control of Present and a Control of the Contr |  |
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| Rule  | Status   | Documenting Statement(s), If applicable  |
|   |  | Documenting Statement(s), if applicable  |
| 5180:2-13-08 Child Care Staff   | Compliant  |  |
| Requirements  |  |  |
|   |  |  |
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| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13-08 Whistle Blower   | Compliant  |  |
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| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13-09 Background Checks  | Compliant  |  |
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| Rule  | Status   | Documenting Statement(s), If applicable  |
| 20000000  |  | bootamenting statement(s), if applicable |
| 5180:2-13-11 Indoor Space   | Compliant  |  |
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| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13-11 Outdoor Equipment  | Compliant  |  |
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| Rule  | Status   | Documenting Statement(s), If applicable  |
| 5180:2-13-11 Fall Zone  | Compliant  |  |
| France Assistanting 10 Close 18 FIRE SQUESTED SHARESTER   | 1 (0000 Technology 1 (00000) (00000000)  |  |
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| Rule   | Status   | Documenting Statement(s), If applicable |
|--|--|---|
| 5180:2-13-12 Safe Equipment  | Compliant  | bocumenting statement(s), it applicable |
| 5160:2-15-12 Sale Equipment  | Compliant  |   |
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| Rule   | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-12 Carbon Monoxide   | Compliant  |   |
| Detectors - Type B Only  | Solids of Christophy Paper Residence South Address |   |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |  |   |
|  | 1  | -                                       |
| Rule   | Status   | Documenting Statement(s), If applicable |
|  |  | Documenting Statement(s), if applicable |
| 5180:2-13-13 Smoke Free  | Compliant  |   |
|  |  |   |
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| Rule   | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-13 Handwashing   | Compliant  |   |
| STOSIE TO TO HAMASIMIS   | Compilation  |   |
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| Rule   | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-13 Toothbrushing   | Compliant  |   |
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| Rule   | Status   | Documenting Statement(s), If applicable |
|  |  | bocumenting statement(s), if applicable |
| 5180:2-13-14 Requirements for Field  | Compliant  |   |
| and Routine Trips  |  |   |
|  |  |   |
|  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-14 Ratio and Supervision   | Compliant  |   |
| for Field and Routine Trips  |  |   |
| Tor rield and Routine Trips  |  |   |
|  | 1  |   |
|  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-14 Driver Requirements   | Compliant  |   |
|  |  |   |
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|  | •  | · ·                                     |
| Rule   | Status   | Documenting Statement(s), If applicable |
|  |  | Documenting statement(3), if applicable |
| 5180:2-13-14 Vehicle Inspections   | Compliant  |   |
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| Rule   | Chattie  | Documenting Statement(s), If applicable |
|  | Status   | Documenting Statement(3), it applicable |
|  |  | bocumenting statement(s), if applicable |
| 5180:2-13-14 Vehicle Requirements  | Compliant  | bocumenting statement(s), if applicable |
|  |  | bocumenting statement(s), if applicable |
| All Control of the Co |  | bocumenting statement(s), if applicable |
|  |  | Documenting Statement(s), If applicable |



| 5180:2-13-15 Health Conditions                                | Compliant           |   |
|---|---------------------|---|
| Rule 5180:2-13-15 Child Records Retention and Confidentiality | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5180:2-13-16 Medical, Dental, and                        | Status Compliant    | Documenting Statement(s), If applicable |
| General Emergency Plan  |                     | Desumenting Statement/s) If applicable  |
| 5180:2-13-16 Emergency Drills                                 | Status   Compliant  | Documenting Statement(s), If applicable |
| Rule 5180:2-13-16 First Aid Kit/Standard Precautions          | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5180:2-13-16 Communicable Diseases                       | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-16 Incident/Injury                          | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5180:2-13-16 Emergency                                   | Status Compliant    | Documenting Statement(s), If applicable |
| Preparedness and Response Plan                                | Status              | Documenting Statement(s), If applicable |
| 5180:2-13-17 Programming                                      | Compliant           |   |
| Rule<br>5180:2-13-17 Materials and<br>Equipment               | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-18 Group Size and Ratios                    | Status<br>Compliant | Documenting Statement(s), If applicable |



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|---|------------|---|
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-18 Attendance                       | Compliant  |   |
|   |            |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-19 Supervision                      | Compliant  |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-19 School Age Supervision           | Compliant  |   |
| Dula  | Chabin     |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-21 Evening and Overnight Care       | Compliant  |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-20 Sleep and Nap<br>Requirements    | Compliant  |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-19 Child Guidance                   | Compliant  | boomening statement(s), it approaches   |
|   |            |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-20 Crib and Playpen<br>Requirements | Compliant  |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
| 5180:2-13-21 Sanitary Environment and Hygiene | Compliant  |   |
| Rule  | Status     | Documenting Statement(s), If applicable |
|   | Compliant  |   |
| 5180:2-13-22 Meals and Snacks                 |            |   |
| 5180:2-13-22 Meals and Snacks                 | Status     | Documenting Statement(s), If applicable |



| Rule                                | Status   | Documenting Statement(s), If applicable |
|-------------------------------------|--|---|
| 5180:2-13-22 Fluid Milk             | The state of the s | Documenting Statement(S), if applicable |
| 5180:2-13-22 Fluid WillK            | Compliant  |   |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
| Rule                                | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-23 Infant Daily Care      | Compliant  |   |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
| Rule                                | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-23 Infant Bottle and Food | Compliant  |   |
| Preparation                         |  |   |
| reparation                          |  |   |
|                                     |  |   |
| Rule                                | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-23 Diapering              | Compliant  | bocumenting statement(s), it applicable |
| 3160.2-15-25 Diapering              | Compilant  |   |
|                                     |  |   |
|                                     |  |   |
| D. I -                              | Chahara  | D                                       |
| Rule                                | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-24 On-site Pools          | Compliant  |   |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
| Rule                                | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-24 Swimming Sites         | Compliant  |   |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
| Rule                                | Status   | Documenting Statement(s), If applicable |
| 5180:2-13-24 Parent Permission for  | Compliant  |   |
| Swimming                            |  |   |
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