

# **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	ils	
Program Name	Program Number		Program Type
Smarty Pants Learning Centers Inc	2230028492		Child Care Center
Address			County
450 E. 200th Street Euclid			CUYAHOGA
ОН			
44119			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
07/10/2023	E	49	
Fire Inspection Approval Date	Food Service Risk Level		
07/07/2023	Level III		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Provisional	Full		Unannounced	
Inspection Date	Begin Time		End Time	
03/26/2024	9:15 AM		1:30 PM	
Reviewer:				
Kathryn Noftz				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	7	0	2	5

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant ( Birth to < 18 m)		1	0	1
Young Toddler		5	0	5
Total Under 2 ½ Years	8	6	0	6
Older Toddler		4	0	4
Preschool		5	0	5
School Age		0	5	5
Total Capacity/Enrollment	50	9	5	20

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

Infant	12 months to < 18 months	1 to 3	
Infant	12 months to < 18 months	1 to 3	
Infant	12 months to < 18 months	1 to 10	Infant/Toddler/Preschool/School
			age combined
Toddler	18 months to < 30 months	1 to 4	Toddler/Preschool combined
Toddler	18 months to < 30 months	2 to 7	Toddler/Preschool/Schoolage
			combined

# **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	1
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# **Moderate Risk Non-Compliances**

Domain: 01 Ratio & Supervision

Rule: 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 1 child care staff member(s) for 10 children was determined to have occurred for the combined Infant/Toddler/Preschool/School age group when the situation in number(s) 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: 04/25/2024

#### 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 and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

<u>Finding</u>: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number(s) 5,7,12,13,39,44 below:

1. No plan was on file.

#### (Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing or incomplete.
- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete.

(Page 2)

- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

### (Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s)of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

#### (Page 4)

- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. Medication and/or supplies required for medication were not onsite/available to administer as instructed and alternate instructions for this situation were not included on the plan.



Provide staff training. 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: 05/24/2024

### Low Risk Non-Compliances

### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

<u>Code</u>: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

<u>Finding</u>: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number(s) 3,14,18 below:

- 1. Manufacturer's guidelines for the [ ] were not followed in that [ ].
- 2. The straps were missing on the [ ].
- 3. The straps were not used on the changing table.
- 4. The straps were attached and were used, but were not used in a safe manner.
- 5. The equipment had sharp points or corners.
- 6. The equipment had splinters.
- 7. The equipment had protruding nails.
- 8. The equipment had loose or rusty parts.
- 9. The equipment had paint which contains lead or other poisonous materials.
- 10. The equipment had hazardous features.
- 11. A fan was unstable and could easily tip over.
- 12. A fan had openings a finger could enter.
- 13. The pipes from the heat pump felt hot to the touch
- 14. A space heater felt hot to the touch
- 15. The position of a space heater was a tripping hazard
- 16. The air conditioning unit was not enclosed and was accessible to children on the playground.
- 17. A ball pit, trampoline, inflatable bounce house, inflatable slide, or inflatable equipment used for climbing and bouncing was used.
- 18. Other- A space heater had openings a finger could enter.

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

Corrective Action Plan Due: 04/25/2024	

# Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: 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.

<u>Finding</u>: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 22 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. Employee(s) purse(s).
- 7. Diaper bags.
- 8. Television not securely anchored.
- 9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 10. Smoke detector needing batteries replaced.
- 11. An area rug did not have a nonskid backing.
- 12. An area rug presented a tripping hazard.
- 13. A floor surface that was unsafe in that [ ].
- 14. No platform was provided for the sink or toilet in the [ ] classroom.
- 15. The platform provided for the sink or toilet in the [ ] classroom was not sturdy.
- 16. The platform provided for the sink or toilet in the [ ] classroom posed a safety hazard in that [ ].
- 17. Telephone cords.
- 18. Staff member stepped over a barrier/gate while holding a child.
- 19. Emergency exits were blocked by the following classroom furniture: [ ].
- 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- Emergency pull station was blocked by the following classroom furniture: Coat cubby/shelf.

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: 04/25/2024



# Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Separation of Children Under 2 1/2 Years

Code: The program is required to separate children younger and older than 2 1/2 years of age.

<u>Finding</u>: During the inspection, it was determined a group that included at least one child less than the age of two and one half years of age was not kept separate from groups of older children as noted in number(s) 3,4 below:

- 1) The [ ] group, which included children less than two and one half years of age, were cared for in a space where a group of older children were receiving care.
- 2) A barrier was not used to separate the space being used by the group of children less than two and one half years of age from space being used for groups of children two and one half years and older.
- 3) The barrier separating the groups was not at least 36 inches in height.
- 4) The barrier separating the groups was not continuous.

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

Corrective Action Plan Due: 04/25/2024

#### **Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 6 below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies 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);
- 6. Tuberculosis (TB) screening/test information was missing:

- 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 6a.
- 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: 05/03/2024

### Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to remove all medication, medical foods and topical products that are no longer being administered or have expired. The program is also required to maintain current documentation to administer medications, medical foods and topical products.

<u>Finding</u>: During the inspection, it was determined that medication, medical foods and/or topical products did not meet the requirement(s) for administering medication, medical foods, and/or medical products as noted in number(s) 3 below:

- 1. The medication, medical food, or topical product was no longer needed and had not been removed from the program.
- 2. The medication, medical food, or topical product had expired and had not been removed from the program.
- The prescription label had expired.

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

Corrective Action Plan Due: 04/30/2024

# Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
		() (6 1)
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	bocamenting statement(s), it applicable
Requirements	Compilant	
Requirements	ļ.	<u> </u>
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department	Compliant	became many statement (o), in approach
Inspection	Caracal Manager	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note:
,	1	Documentation of a fire inspection
		without any uncorrected violations must
		be secured for the program. Secure a
		new fire inspection by 10-13-24.
		new me map assume y as as a m
Rule	Status	Documenting Statement(s), If applicable
Rule Rule: 5101:2-12-04 Food Service	Status Compliant	Documenting Statement(s), If applicable  Documenting Statement: During the
146, 226, 612	The Control of the Co	
Rule: 5101:2-12-04 Food Service	The Control of the Co	Documenting Statement: During the
Rule: 5101:2-12-04 Food Service	The Control of the Co	Documenting Statement: During the inspection, it was determined the
Rule: 5101:2-12-04 Food Service	The Control of the Co	Documenting Statement: During the inspection, it was determined the program had documentation they had
Rule: 5101:2-12-04 Food Service	The Control of the Co	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the
Rule: 5101:2-12-04 Food Service	The Control of the Co	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be
Rule: 5101:2-12-04 Food Service	The Control of the Co	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service
Rule: 5101:2-12-04 Food Service	The Control of the Co	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the
Rule: 5101:2-12-04 Food Service Requirements	The Control of the Co	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.
Rule: 5101:2-12-04 Food Service Requirements  Rule	Compliant	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the
Rule: 5101:2-12-04 Food Service Requirements  Rule 5101:2-12-07 Administrator	Compliant	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.
Rule: 5101:2-12-04 Food Service Requirements  Rule	Compliant	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.
Rule: 5101:2-12-04 Food Service Requirements  Rule 5101:2-12-07 Administrator Qualifications	Status Compliant	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.  Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements  Rule 5101:2-12-07 Administrator Qualifications  Rule	Status Compliant Status Status	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.
Rule: 5101:2-12-04 Food Service Requirements  Rule 5101:2-12-07 Administrator Qualifications  Rule 5101:2-12-07 Administrator	Status Compliant	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.  Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements  Rule 5101:2-12-07 Administrator Qualifications  Rule	Status Compliant Status Status	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.  Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements  Rule 5101:2-12-07 Administrator Qualifications  Rule 5101:2-12-07 Administrator	Status Compliant Status Status	Documenting Statement: During the inspection, it was determined the program had documentation they had applied and paid for the renewal of the annual food service license. Please be reminded to post the new food service license once it has been received from the health department.  Documenting Statement(s), If applicable

5101:2-12-07 Written Program	Compliant	
Policies and Procedures	<i>*</i>	
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Rule	Status	Documenting Statement(s) If applicable
344.50.50.50		Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	
Requirements	Compilant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Health Training	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
AND CONTRACTOR OF THE CONTRACT	Compilant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space	Compliant	Documenting Statement: The outdoor
Requirements		play area is separated from traffic and
		other hazards by a fence.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and	Compliant	0
Environment	Compliant	
Litvironnient		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
<u> </u>	1	
Rule	Status	Documenting Statement(s), If applicable
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5101:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field	Compliant	
Trip Procedures		
Trip Flocedules		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation - Driver	Compliant	
Requirements	100	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation -	Compliant	Documenting Statement: An annual
Vehicle Requirements	50	safety check of the vehicle(s), using the
		JFS 01230 "Vehicle Inspection Report For
		Child Care Centers" form, was verified
		and dated #3356- 9/20/23.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records	Secretaries and the secretarian secretarian	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan	33	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	bookins.iiiii) baatsiiidiit(a), ii appiidabie
3101.2 12 10 Emergency brins	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	
Precautions		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	becamenting statement(e), it approase
Reporting	Compilant	
Керогинд		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	bocumenting statement(3), if applicable
3101.2 12 17 Daily Schedule	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	
Equipment	Jonephane	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	booking statement(a), it applicable
STOTIZ IZ I/ Bully Gutuool Flay	Compilation	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
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- Comments		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	-	Boodinericing statement(s), it approaches
3101.2-12-19 Supervision	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
	F	
	SII	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	NAME OF TAXABLE PARTY.	boodinenting statement(s), it applicable
5101:2-12-20 Cribs	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		
<u>,                                      </u>		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
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Rule	Status	Documenting Statement/s) If annies his
		Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food	Compliant	S(-), app.,
Appendix to the second	Compilant	
Preparation		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet	Compliant	J
i i i	Compilant	
Training		
Rule	Status	Documenting Statement(s), If applicable
		Desamentally estate ment(e), it applicable



5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	