

Family Child Care Licensing Inspection Full Report

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

Program Details		
Program Name Little Friend Connections	Program Number 2240029382	Program Type FCC - Type B Home
Address 2314 Theodore Ave DAYTON OH 45405	County MONTGOMERY	

Inspection Information				
Inspection Type Provisional		Inspection Scope Full		Inspection Notice Unannounced
Inspection Date 04/15/2025		Begin Time 2:50 PM		End Time 5:19 PM
Reviewer: Kenya Campbell				
Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 17	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 22

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		1	0	1
Young Toddler		1	0	1
Total Under 2 Years	3	2	0	2
Older Toddler		2	0	2
Preschool		1	0	1
School Age		8	0	8
Total Capacity/Enrollment	6	11	0	13

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Mary's Group	Mixed Age Group	1 to 10	Upon arrival to the program, there were four children under the age of 4. Within 30

			minutes of arrival, 6 children arrived via Mark Woods - husband & transportation driver for the program.
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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

Rule: 5180:2-13-18 Group Size and Ratios

Code: The program is required to monitor the number of children in care to remain within the licensed capacity.

Findings: During the inspection, it was determined there were 10 children in care during the hours of operation, which is over the capacity listed on the license. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/17/2025

Low Risk Non-Compliances

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(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. 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. Dog food in the dog bowl was accessible to children.

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

Corrective Action Plan Due: 05/17/2025

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(s) 5,6 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: 05/17/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to anchor and amount gates that are free from entrapment and are the approved style.

Findings: During the inspection, it was determined the gate(s) used were not safe as noted in number(s) 2,3,4 below:

1. Anchored;
2. Mounted;
3. Free of Entrapment;
4. The Approved Style;
5. 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: 05/17/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-16 First Aid Kit/Standard Precautions

Code: The program is required to store first aid supplies in an unlocked, closed first aid container that is inaccessible to children.

Findings: During the inspection, it was determined that the first aid supplies were not stored according to the requirements listed in item number(s) 2 below:

1. Stored in a closed container
2. Stored in a unlocked container

3. Stored out of the reach of children
4. Stored on the premises
5. Stored readily available to the provider

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

Corrective Action Plan Due: 05/17/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) 1,2,3 below:

1. Monthly fire drills
2. Monthly weather emergency drills (March through September)
3. Emergency/lockdown drills in each quarter of the calendar year

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

Corrective Action Plan Due: 05/17/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Drills

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit [onsite/ on the vehicle/ on a field trip] as required, that included all items listed in the appendix A of the rule. The kit(s) were missing the item(s) or the item(s) were not replaced after use and/or expired listed in number(s) 6 below:

1. One roll of first-aid tape;
2. Individually wrapped sterile gauze; squares in assorted sizes;
3. Sterile adhesive bandages in assorted sizes;
4. Tweezers;
5. Gauze rolled bandage;
6. Triangular bandage;
7. Rounded end scissors;
8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);

9. A working digital thermometer;
10. Disposable non-latex gloves;
11. A working flashlight;
12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;
13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;
14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
15. Soap or waterless sanitizer (field trip or transporting away from the program only);
16. Bottled water (field trip or transporting away from the program only).

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

Corrective Action Plan Due: 05/17/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-22 Meals and Snacks

Code: The program is required to refrain from using television, computers, or other devices during meals and snacks.

Findings: During this inspection it was determined that television were on during meals and snacks. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/17/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 3 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/17/2025

Domain: 06 Program Information

Rule: 5180:2-13-14 Requirements for Field and Routine Trips

Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Findings: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in number(s) 8 below:

1. Written parental permission was not secured for field trips and/or routine trips off the premises.
2. The written permission was missing the child's name.
3. The written permission was missing the date(s) of the trip(s) (field trips only).
4. The written permission was missing the destination(s) of the trip(s).
5. The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
6. The written permission was missing the signature of the parent.
7. The written permission was missing the date on which the permission was signed.
8. The written permission was missing a statement notifying parents how their child will be transported.
9. Permission forms for routine trips were not being updated annually.
10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
11. Other: [].

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

Corrective Action Plan Due: 05/17/2025

Domain: 06 Program Information

Rule: 5180:2-13-14 Vehicle Inspections

Code: The program is required to complete and document weekly vehicle inspections.

Findings: During the inspection, it was determined that the program had not documented weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

1. A visual inspection of the tires for wear and tire pressure;
2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges;
3. An inspection for properly functioning child and driver restraints;
4. An inspection for properly functioning doors and windows;
5. An inspection for, and cleaning of, debris from the inside of the vehicle;
6. Review of First Aid Kit and Supplies required for transportation.

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

Corrective Action Plan Due: 05/17/2025

Domain: 06 Program Information

Rule: 5180:2-13-14 Driver Requirements

Code: The program is required to have all drivers be an employee or child care staff member of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program. Only a child care staff member or employee may transport children without the provider present, except parents may transport children for field trips.

Findings: During the inspection, it was determined that the requirements for drivers was not met as listed in number(s) 3,4 below:

1. The driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.
2. At least one employee or child care staff member who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.
3. The driver used to transport children was not an employee or child care staff member of the program, a public transportation driver, or employed by a company contracted to provide transportation service.
4. The driver who was not a child care staff member or employee who is used in accordance with the requirements in rule 5101:2-13-08 transported children without the provider present.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/17/2025

Domain: 07 Diapering & Infant Care

Rule: 5180:2-13-23 Infant Bottle and Food Preparation

Code: The program is required to retain and update infant feeding instructions.

Findings: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review form were not on file, as required by this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/17/2025

Domain: 07 Diapering & Infant Care

Rule: 5180:2-13-23 Infant Daily Care

Code: The program is required to provide a daily written record for each infant in care to the parents when picking up the infant each day.

Findings: During the inspection, it was determined that the written record used to document infant routines and activities did not meet the requirements as noted in number(s) 1 below:

1. A daily written record was not provided to the parent or person picking up the infant on a daily basis.
2. Food intake was missing.
3. Sleeping patterns was missing.
4. Times and results of diaper changes was missing.
5. Information about daily activities was missing.

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

Corrective Action Plan Due: 05/17/2025

Domain: 07 Diapering & Infant Care

Rule: 5180:2-13-23 Infant Bottle and Food Preparation

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

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

Corrective Action Plan Due: 05/17/2025

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 CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training(s) listed in number(s) 2, 5, 11,15, below:

1. First Aid - expired training
2. First Aid - did not have verification of 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 the program serves 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 by staff 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 the 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: 05/17/2025

Domain: 08 Staff Files

Rule: 5180:2-13-08 Employee Requirements

Code: The program is required to obtain completed medical statements for all program staff.

Findings: In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number(s) 1.

1. A medical statement was not on file;
2. The medical statement(s) on file were not dated within 12 months of the individual'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 individual 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);

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

Corrective Action Plan Due: 05/17/2025

Domain: 08 Staff Files

Rule: 5180:2-13-08 Child Care Staff Requirements

Code: The program staff is required to have educational verification on file at the program.

Findings: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was not on file to verify that that a high school graduate was at least 16 years of age.
3. Documentation of a high school education was not on file for a person, counted in the staff/child ratio, and therefore was used as a Child Care Staff Member.

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

Corrective Action Plan Due: 05/17/2025

Domain: 08 Staff Files

Rule: 5180:2-13-08 Child Care Staff Requirements

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

Findings: In review of the staff records, it was determined that child care staff member(s) or substitute child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 05/17/2025

Domain: 08 Staff Files

Rule: 5180:2-13-07 Provider Responsibilities

Code: The program is required to notify the county agency of any change in the household composition.

Findings: During the inspection, it was determined the provider did not update OCLQS as noted in the following number 1 below:

1. A change in household composition including someone joining the household or leaving the household within five calendar days.
2. An individual staying in the home for more than ten consecutive calendar days.

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

Corrective Action Plan Due: 05/17/2025

Domain: 08 Staff Files

Rule: 5180:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2, 3, 5 below:

1. The provider had not created or updated their individual profile in the OPR.
2. The provider had not created or updated the program's organizational dashboard in the OPR.
3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.
4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.
7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.
10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.
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: 05/17/2025

Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training

Code: Child care staff members and substitute child care staff members are required to complete health trainings within the first ninety days of hire and prior to being left alone with children.

Findings: In review of records, it was determined the CCSM or Substitute CCSM did not meet health training requirements listed in number (s) 1 below:

1. All health trainings were not completed prior to being left alone with children.
2. First Aid training was not completed within the first ninety days of hire.
3. CPR training was not completed within the first ninety days of hire.
4. Communicable Disease training was not completed within the first ninety days of hire.
5. Child Abuse training was not completed within the first ninety days of hire.

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: 05/17/2025

Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

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

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

Corrective Action Plan Due: 05/17/2025

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Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary Closure	Compliant	

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	

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	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-03 Inspection Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Requirements for Type B Homes	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Fire Safety for Type B Homes	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Type B Provider - Foster Parent	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional Development	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5180:2-13-11 Fall Zone	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention and Confidentiality	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and General Emergency Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency Preparedness and Response Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and Equipment	Compliant	
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	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment and Hygiene	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Crib and Playpen Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Fluid Milk	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	
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 Swimming	Compliant	
Rule	Status	Documenting Statement(s), If applicable



**Department of
Children & Youth**

5180:2-13-25 Medication Requirements	Compliant	
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