Department of Children & Youth

Licensing Inspection Full Report

All licensed early care and education programs are inspected at least once each year. Non-compliances are documented and grouped by risk level. Documenting statements, technical assistance provided and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the Department of Children & Youth website at https://childcaresearch.ohio.gov/ . This includes complaint investigation reports with substantiated allegations. For any other early care and education records, please contact the Family and Customer Support Center at 1-844-234-5437.

Program Details		
Program Name One Step at a Time Learning Academy	Program Number 2260033686	Program Type FCC - Type B Home
Address 5200 Main St. Sylvania OH 43560		County LUCAS

Inspection Information			
Inspection Type Pre-license	Inspection Scope Full	Inspection Method On-site Inspection	Inspection Notice Announced
Inspection Date 06/22/2026	Begin Time 10:08 AM	End Time 1:12 PM	Reviewer: Kimberly Dada

Summary of Findings			
No. Requirements Verified 68	No. Requirements with Non-compliances 9		No. Requirements Compliant 58
No. Serious Risk 0	No. Moderate Risk Findings 2	No. Other Non-compliance Findings 9	No. Technical Assistance Provided 0

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

Department of Children & Youth

Staff-Child Ratios at the Time of Inspection				
Group	**Age Group/Range**	**Ratio Observed**	**Compliance**	**Comment**
one		1 to 0	In Compliance	1:0 11:00 am

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 5180:2-12-03, 5180:2-13-03, 5180:2-19-10 and 5180:2-20-02 detail the process for submitting a request for review. The request for review must be submitted within ten business days from the receipt of the licensing report. In addition, if the program is Step Up To Quality rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances

A serious risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

No serious risk non-compliances were observed during this inspection

Moderate Risk Non-Compliances

A moderate risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

Domain: **02 Safe & Sanitary Environment**

Rule: 5180:2-13-12 Carbon Monoxide Detectors - Type B Only

Requirement: The program is required to meet all requirements for carbon monoxide detectors.

Finding: During the inspection, it was determined that the Type B Home did not have a working carbon monoxide detector on each floor where care is provided in accordance with manufacturer's recommendations. A working carbon monoxide detector 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: 07/24/2026

Domain: **04 Indoor/Outdoor Space**

Rule: 5180:2-13-11 Outdoor Space

Requirement: The program is required to have an outdoor play space free from immediate risk.

Finding: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number 1 below:

1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.

2. The fencing had missing slat boards through which children could leave the playground.

3. The gate was broken and did not close.

4. The latch on the gate was broken.

5. The gate had no latch.

6. The fencing was broken.

7. The latch was easily opened by children on the playground.

8. The latch was not engaged to prevent children from opening the gate.

9. The portable fencing approved for use by the Department was not being used.

10. Other [ ].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/24/2026

Other Non-Compliances

This section includes other rule violations that are observable and/or based on facts.

Domain: **00 License & Approvals**

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

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

Finding: During the inspection, it was determined that the Type B Home did not have a working smoke alarm in the basement or smoke alarm(s) 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: 07/24/2026

Domain: **02 Safe & Sanitary Environment**

Rule: 5180:2-13-12 Safe Environment

Requirement: 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.

Finding: 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) 1 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: 07/24/2026

Domain: **03 Postings & Equipment**

Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan

Requirement: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Finding: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number(s) 1 below:

1. The plan was not posted on each level of the home used for child care.

2. The name, address and telephone number of the program were not complete.

3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.

4. The telephone number for emergency squad, fire department hospital, poison control program, public children services agency, local health department, local emergency management agency and police department were not complete.

5. Location of children's records was not complete.

6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.

7. The current version of the prescribed form was not used.

8. The plan was not implemented when necessary in that [ ].

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

Corrective Action Plan Due: 07/24/2026

Domain: **03 Postings & Equipment**

Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan

Requirement: The program is required to post the fire and weather alert plan with a diagram.

Finding: During the inspection, it was determined the following information was not posted for item number(s) 1,3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.

2. Weather alert plan was missing details for [ ].

3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 07/24/2026

Domain: **05 Health & Safety**

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

Requirement: 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.

Finding: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 1 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: 07/24/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-09 Background Checks

Requirement: The program is required to have the applicable JFS 01176 "Program Notification of Background Check Review for Child Care" on file.

Finding: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 2 below:

1. The JFS 01176 “Program Notification of Background Check Review for Child Care” the program received from the Department was not on file and the individual was not left alone with children.

2. The JFS 01177 “Individual Notification of Background Check Review for Child Care” was on file instead of the JFS 01176.

3. The JFS 01176 on file was for a different program.

Submit the program’s corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/24/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-07 Staff Records

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

Finding: 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) 6 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: 07/24/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-07 Provider Responsibilities

Requirement: The program is required to have the current licensing rules available in a noticeable area on the premises.

Finding: During the inspection, it was determined the current licensing rules were not available on the premises. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 07/24/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-07 Provider Responsibilities

Requirement: The provider is required to reside at the licensed location, not have additional activities or employment during the program's operating hours, be on-site at the program for at least 75 percent of the program's operating hours, and have hours of availability posted in a noticeable place.

Finding: During the inspection, it was determined that the provider was not meeting the following requirements as noted in number(s) 4 below :

1. The provider no longer resides at the licensed location.

2. The licensed provider has additional activities/employment during operating hours, in that [ ].

3. The provider was not on-site for 75 percent of the program's operating hours as required by this rule.

4. The provider did not have hours of availability to meet with parents a noticeable location.

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

Corrective Action Plan Due: 07/24/2026

Domain: **02 Safe & Sanitary Environment**
Rule: 5180:2-13-12 Carbon Monoxide Detectors - Type B Only
Requirement:The program is required to meet all requirements for carbon monoxide detectors.
Findings:During the inspection, it was determined that the Type B Home did not have a working carbon monoxide detector on each floor where care is provided in accordance with manufacturer's recommendations. A working carbon monoxide detector 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: 07/24/2026

Domain: **02 Safe & Sanitary Environment**
Rule: 5180:2-13-12 Safe Environment
Requirement: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) 1 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: 07/24/2026

Domain: **03 Postings & Equipment**
Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan
Requirement:The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.
Findings:During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number(s) 1 below:

1. The plan was not posted on each level of the home used for child care.
2. The name, address and telephone number of the program were not complete.
3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
4. The telephone number for emergency squad, fire department hospital, poison control program, public children services agency, local health department, local emergency management agency and police department were not complete.
5. Location of children's records was not complete.
6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.
7. The current version of the prescribed form was not used.

8. The plan was not implemented when necessary in that [ ].

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 07/24/2026

Domain: **03 Postings & Equipment**
Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan
Requirement:The program is required to post the fire and weather alert plan with a diagram.
Findings:During the inspection, it was determined the following information was not posted for item number(s) 1,3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for [ ].
3. Weather alert plan was missing a diagram indicating evacuation routes.

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.
Corrective Action Plan Due: 07/24/2026

Domain: **04 Indoor/Outdoor Space**
Rule: 5180:2-13-11 Outdoor Space
Requirement:The program is required to have an outdoor play space free from immediate risk.
Findings:During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number 1 below:

1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
2. The fencing had missing slat boards through which children could leave the playground.
3. The gate was broken and did not close.
4. The latch on the gate was broken.
5. The gate had no latch.
6. The fencing was broken.
7. The latch was easily opened by children on the playground.
8. The latch was not engaged to prevent children from opening the gate.
9. The portable fencing approved for use by the Department was not being used.
10. Other [ ].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 07/24/2026

Domain: **05 Health & Safety**
Rule: 5180:2-13-22 Meals and Snacks
Requirement: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) 1 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: 07/24/2026

Domain: **08 Staff Files**
Rule: 5180:2-13-09 Background Checks
Requirement:The program is required to have the applicable JFS 01176 "Program Notification of Background Check Review for Child Care" on file.
Findings:In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 2 below:

1. The JFS 01176 “Program Notification of Background Check Review for Child Care” the program received from the Department was not on file and the individual was not left alone with children.
2. The JFS 01177 “Individual Notification of Background Check Review for Child Care” was on file instead of the JFS 01176.
3. The JFS 01176 on file was for a different program.

Submit the program’s corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.
Corrective Action Plan Due: 07/24/2026

Domain: **08 Staff Files**
Rule: 5180:2-13-07 Staff Records
Requirement: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) 6 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: 07/24/2026

Domain: **08 Staff Files**
Rule: 5180:2-13-07 Provider Responsibilities
Requirement:The program is required to have the current licensing rules available in a noticeable area on the premises.
Findings:During the inspection, it was determined the current licensing rules were not available on the premises.
Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.
Corrective Action Plan Due: 07/24/2026

Domain: **08 Staff Files**
Rule: 5180:2-13-07 Provider Responsibilities
Requirement:The provider is required to reside at the licensed location, not have additional activities or employment during the program's operating hours, be on-site at the program for at least 75 percent of the program's operating hours, and have hours of availability posted in a noticeable place.
Findings:During the inspection, it was determined that the provider was not meeting the following requirements as noted in number(s) 4 below :

1. The provider no longer resides at the licensed location.
2. The licensed provider has additional activities/employment during operating hours, in that [ ].
3. The provider was not on-site for 75 percent of the program’s operating hours as required by this rule.
4. The provider did not have hours of availability to meet with parents a noticeable location.

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

Department of Children & Youth

Corrective Action Plan Due: 07/24/2026

Technical Assistance Provided

This section documents technical assistance provided to the program when the program demonstrated an overall level of compliance with a rule requirement.

In Compliance/Not Verified/Previously Verified/Not Applicable

This section documents rule requirements that were assessed as fully compliant, previously verified, not verified during this inspection or not applicable to the program.

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

5180:2-13-05 Denial, Revocation, and Suspension	Not Applicable

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 Employee Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Health Training	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 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 Pets	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
5180:2-13-13 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 Clean environment and equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Requirements for Field and Routine Trips	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 Driver Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	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 Child Medical and Enrollment Records	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 Emergency Drills	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 First Aid Kit/Standard Precautions	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 Group Size and Ratios	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
5180:2-13-20 Sleep and Nap Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 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
5180:2-13-21 Sanitary Environment and Hygiene	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 Infant Daily Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food Preparation	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
5180:2-13-25 Medication Requirements	Compliant	