



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 <http://jfs.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 Care 4 Kids Educational Child Care Center | Program Number 000000104102 | Program Type Child Care Center | |
| Address 5025 CLEVELAND RD WOOSTER OH 44691 | | County WAYNE | |
| Building Approval Date 01/28/2002 | Use Group/Code E with I-2 | Occupancy Limit 225 | Maximum Under 2 ½ |
| Fire Inspection Approval Date 03/15/2021 | Food Service Risk Level Level III | | |

| Inspection Information | | |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type Annual | Inspection Scope Full | Inspection Notice Unannounced |
| Inspection Date 09/10/2021 | Begin Time 9:45 AM | End Time 12:15 PM |
| Reviewer: MATTHEW PIGNATO | | |

| Summary of Findings | | | | |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified 57 | No. Rules with Non-compliances 1 | No. Serious Risk 0 | No. Moderate Risk 1 | No. Low Risk 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) | | 13 | 0 | 13 |
| Young Toddler | | 4 | 0 | 4 |
| Total Under 2 ½ Years | 76 | 17 | 0 | 17 |
| Older Toddler | | 12 | 0 | 12 |
| Preschool | | 35 | 0 | 35 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 225 | 47 | 0 | 64 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--------------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Toddler | 18 months to < 30 months | 2 to 10 | 1st |



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|----------------------------|--------------------------|---------|-----|
| Toddler | 18 months to < 30 months | 2 to 9 | 2nd |
| Older Infant/Young Toddler | 12 months to < 18 months | 2 to 4 | 1st |
| Older Infant/Young Toddler | 12 months to < 18 months | 1 to 3 | 2nd |
| Infant | 0 to < 12 months | 2 to 9 | 1st |
| Infant | 0 to < 12 months | 2 to 9 | 2nd |
| Preschool | 3 years to < 4 years | 1 to 10 | 1st |
| Preschool | 3 years to < 4 years | 1 to 10 | 2nd |
| Pre-K | 4 years to < 5 years | 2 to 8 | 1st |
| Pre-K | 4 years to < 5 years | 2 to 8 | 2nd |

Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration and Food Supplements

Code: The program is required to use the appropriate form and retain current documentation to administer medications. The program is also required to obtain separate documentation for each medication and child, and retain on file each JFS 01217 "Request for Administration of Medication for Child Care" for at least one year. The program is required to administer medication only if it has the prescription label attached or had written instructions from a licensed physician. The program is also required to have each medication to be administered stored in its original container.

Finding: During the inspection, it was determined the program did not meet the requirement(s) for administering a medication, food supplement or medical food to a child as noted in number 19 below:

1. No JFS 01217 "Request for Administration of Medication for Child Care" was on file.
2. The child's name was missing on the JFS 01217.



3. The child's date of birth was missing on the JFS 01217.
4. The child's weight was missing on the JFS 01217.
5. The name of the medication was missing on the JFS 01217.
6. The exact dose was missing on the JFS 01217.
7. The time to administer was missing on the JFS 01217.
8. The time period to administer was missing on the JFS 01217.
9. The Parent/Guardian's dated signature was missing on the JFS 01217.
10. Possible side effects were missing on the JFS 01217.
11. Expiration date was missing on the JFS 01217.
12. Physician instructions were missing on the JFS 01217.
13. Physician's dated signature was missing on the JFS 01217.
14. Physician's phone number was missing on the JFS 01217.
15. Date medication was administered was missing on the JFS 01217.
16. Time medication was administered was missing on the JFS 01217.
17. Dosage administered was missing on the JFS 01217.
18. Staff member's signature was missing on the JFS 01217.
19. A prescription label was not attached to the prescription medication.
20. The medication or product, [], was not brought to the program in its original container.
21. Parent instructions conflict with either the manufacturer or physician instructions.

Submit the program's corrective action plan, which includes the completed JFS 01217 for each child needed, verification that the prescription label is now attached, and/or verification that the medication or product is now in its original container, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/14/2021

Low Risk Non-Compliances

No Low Risk Non-Compliances were observed during this inspection



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Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-12-22 Meal and Snack Requirements | Compliant | |
| 5101:2-12-13 Handwashing Requirements | Compliant | |
| Rule: 5101:2-12-04 Fire Approval | Compliant | Documenting Statement: Please Note: An annual fire inspection approval must be secured for the program. Secure a new approval by 3/15/22. |
| Rule: 5101:2-12-04 Fire Approval | Compliant | Documenting Statement: Although the program had a current fire approval at the time of the licensing inspection, the program did not have the fire inspection completed within 12 months from the date of the last fire approval. Please ensure that fire inspections are completed in accordance with the rule requirements. |
| 5101:2-12-16 Management of Communicable Disease | Compliant | |
| 5101:2-12-13 Smoke Free Environment | Compliant | |
| 5101:2-12-07 Administrator Qualifications | Compliant | |
| Rule | Status | Documenting Statement(s), If 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 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food License | Compliant | Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: 9922701; Expiration Date: 3-1-22. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and Environment | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard Precautions | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food Handling/Storage | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program Policies and Procedures | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space Requirements | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|--|
| 5101:2-12-16 Emergency Drills | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and Equipment | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Approval | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 License Posted | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 6/9/21. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|--|
| 5101:2-12-23 Infant Daily Care | Compliant | |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records | Compliant | Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule. |
| 5101:2-12-12 Safe Equipment | Compliant | |
| 5101:2-12-15 Medical/Physical Care Plans | Compliant | |
| 5101:2-12-20 Cribs | Compliant | |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years | Compliant | |
| 5101:2-12-08 Orientation and Staff Records | Compliant | |
| 5101:2-12-10 Health Training Requirements | Compliant | |
| 5101:2-12-10 Professional Development Requirements | Compliant | |
| 5101:2-12-12 Safe Environment | Compliant | |
| 5101:2-12-16 Incident/Injury Reporting | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |



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|--|---------------|--|
| 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Attendance Records | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet Training | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement | Compliant | |