

## **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      |
| JUST "4'KIDZ                  | 000000306517            |                 | Child Care Center |
|                               |                         |                 |                   |
| Address                       |                         |                 | County            |
| 13896 GAR HWY CHARDON         |                         |                 | GEAUGA            |
| OH 44024                      |                         |                 |                   |
|                               |                         |                 |                   |
|                               |                         |                 |                   |
| Building Approval Date        | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |
| 05/27/2004                    | E                       | 275             |                   |
| Fire Inspection Approval Date | Food Service Risk Level |                 |                   |
| 08/31/2021                    | Level II                |                 |                   |

| Inspection Information        |                                |                  |                   |              |
|-------------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type               | Inspection So                  | соре             | Inspection Notice |              |
| Annual                        | Full                           |                  | Unannounced       |              |
| Inspection Date<br>02/02/2022 | Begin Time S                   | :00 AM           | End Time 12:45 PM |              |
| Reviewer:<br>MATTHEW PIGNATO  |                                |                  |                   |              |
| Summary of Findings           |                                |                  |                   |              |
| No. Rules Verified            | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                            | 0                              | 0                | 0                 | 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)                                 |                  | 21         | 0         | 21    |
| Young Toddler   |                  | 20         | 0         | 20    |
| Total Under 2 ½ Years                                     | 52               | 41         | 0         | 41    |
| Older Toddler   |                  | 14         | 0         | 14    |
| Preschool   |                  | 66         | 0         | 66    |
| School Age  |                  | 0          | 20        | 20    |
| Total Capacity/Enrollment                                 | 178              | 80         | 20        | 141   |

| Staff-Child Ratios at the Time of Inspection |                          |                |         |
|--|--------------------------|----------------|---------|
| Group  | Age Group/Range          | Ratio Observed | Comment |
| Discoverers                                  | 30 months to < 36 months | 2 to 9         | 1st     |



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| Discoverers      | 30 months to < 36 months | 2 to 10 | 2nd               |
|------------------|--------------------------|---------|-------------------|
| Adventurers      | 3 years to < 4 years     | 1 to 9  | 1st               |
| Adventurers      | 3 years to < 4 years     | 1 to 9  | 2nd               |
| Masterminds      | 4 years to < 5 years     | 2 to 23 | 1st               |
| Masterminds      | 4 years to < 5 years     | 1 to 14 | 2nd               |
| Brainstormers    | 3 years to < 4 years     | 2 to 16 | 1st               |
| Brainstormers    | 3 years to < 4 years     | 2 to 14 | 2nd               |
| Explorers        | 18 months to < 30 months | 2 to 12 | 1st               |
| Explorers        | 18 months to < 30 months | 2 to 14 | 2nd               |
| Little Einsteins | 0 to < 12 months         | 1 to 5  | 1st               |
| Little Einsteins | 0 to < 12 months         | 1 to 5  | 2nd               |
| Little Scholars  | 12 months to < 18 months | 1 to 5  | 1st               |
| Little Scholars  | 12 months to < 18 months | 1 to 5  | 2nd               |
| School Age       | School-Age to < 11 years | 0 to 0  | group not present |
|                  |                          |         | at time of visit  |

## **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** 

No Moderate Risk Non-Compliances were observed during this inspection



No Low Risk Non-Compliances were observed during this inspection

## **Rules In-Compliance/Not Verified**

|                                  |           | ·                                       |
|----------------------------------|-----------|---|
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-02 License Posted      | Compliant |   |
|                                  |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant |   |
|                                  |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection          | Compliant |   |
| Requirements                     |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant |   |
| Inspection                       |           |   |
|                                  | 1         |   |



| Rule  | Status              | Documenting Statement(s), If applicable   |
|---|---------------------|---|
| Rule: 5101:2-12-04 Fire Inspection                            | Compliant           | Documenting Statement: Please Note:       |
|   |                     | Documentation of a fire inspection        |
|   |                     | without any uncorrected violations must   |
|   |                     | be secured for the program. Secure a      |
|   |                     | new fire inspection by 8/31/22.           |
|   |                     |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Food Service                               | Compliant           | Documenting Statement: The food service   |
| Requirements  |                     | license was observed posted. Following is |
|   |                     | the audit number and date of expiration:  |
|   |                     | 9906720; Expiration Date: 3-1-22.         |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator                                    | Compliant           |   |
| Qualifications  |                     |   |
| Rule  | Status              | Documenting Statement(c) If applicable    |
| 5101:2-12-07 Administrator                                    | Compliant           | Documenting Statement(s), If applicable   |
| Responsibilities/Requirements                                 | Compliant           |   |
| Responsibilities/ Requirements                                |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Written Program                                  | Compliant           |   |
| Policies and Procedures                                       |                     |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Medical Statement                                | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Child Care Staff Member                          | Compliant           |   |
| Educational Requirements                                      |                     |   |
| Pulo  | Status              | Documenting Statement(c) If applicable    |
| Rule  | Status<br>Compliant | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-09 Background Check                                 | Compliant           |   |
| Requirements  |                     |   |
| · · · · · · · · · · · · · · · · · · ·                         | ·                   |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-10 Health Training                                  | Compliant           |   |
| Requirements  |                     |   |
| Rule  | Status              | Documenting Statement(c) If applicable    |
|   | Status              | Documenting Statement(s), If applicable   |



| 5101:2-12-10 Professional            | Compliant |   |
|--------------------------------------|-----------|---|
| Development Requirements             |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space            | Compliant |   |
| Requirements                         |           |   |
|                                      | -         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children  | Compliant |   |
| Under 2 1/2 Years                    |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Space           | Compliant |   |
| Requirements                         | Compliant |   |
| Requirements                         |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment  | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant |   |
|                                      |           |   |
| Dula                                 | Chabus    | Desumenting (teterment/s) If emplicable |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment          | Compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment        | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and  | Compliant |   |
| Environment                          |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing             | Compliant |   |
| Requirements                         |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free              | Compliant |   |
| Environment                          |           |   |
|                                      | 1         | I                                       |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of   |
| Enrollment Records                   |           | the inspection, 25% of the children's   |
|                                      |           | records were reviewed, and the records  |
|                                      |           | were complete, as required by the rule. |
|                                      |           |   |
|                                      |           |   |



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|------------------------------------|------------|---|
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care | Compliant  |   |
| Plans                              |            |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and  | Compliant  |   |
|                                    | Compliant  |   |
| General Emergency Plan             |            |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills      | Compliant  |   |
|                                    |            |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard    | Compliant  |   |
| Precautions                        |            |   |
|                                    |            | · · ·                                   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of         | Compliant  |   |
| Communicable Disease               |            |   |
| Communicable Disease               |            |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury       | Compliant  |   |
| Reporting                          |            |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant  |   |
|                                    |            |   |
|                                    |            | · · · ·                                 |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule        | Compliant  |   |
|                                    | compilatio |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and         | Compliant  |   |
|                                    | Compliant  |   |
| Equipment                          |            |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play    | Compliant  |   |
|                                    |            |   |
|                                    |            |   |
| Rule                               | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity      | 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.                     |
|                                    |            | were in compliance.                     |
|                                    |            |   |
|                                    |            |   |



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| Colling to                           |           |   |
|--------------------------------------|-----------|---|
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size              | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Dulo                                 | Status    | Desumenting Statement/c) If applicable  |
| 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             | Compliant |   |
| '                                    |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance          |           |   |
| 5101.2-12-19 Child Guidance          | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping        | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cribs                   | Compliant |   |
|                                      | compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Desumenting Statement/s) If applicable  |
|                                      | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack          | Compliant |   |
| Requirements                         |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant |   |
|                                      | compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement/s) If applicable  |
|                                      |           | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food               | Compliant |   |
| Handling/Storage                     |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care       | Compliant |   |
|                                      |           |   |
|                                      | 1         | J                                       |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
|                                      |           | Documenting statement(s), if applicable |
| 5101:2-12-23 Infant Bottle and Food  | Compliant |   |
| Preparation                          |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet    | Compliant |   |
| Training                             |           |   |
|                                      |           |   |
| Dula                                 | Chathan   |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication              | Compliant |   |
| Administration                       |           |   |
|                                      |           |   |

