

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 Deta	ils	
Program Name	Program Number		Program Type
SHOREGATE UNITED METHODIST NURSERY	000000300154		Child Care Center
SCHOOL			
Address			County
30500 BAYRIDGE BOULEVARD WILLOWICK			LAKE
OH			
44095			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
12/02/1971			
Fire Inspection Approval Date	Food Service Risk Level		
08/29/2025	Exempt		

	Inspection Information					
Inspection Type	Inspection S	cope	Inspection Notice			
Annual	Full		Unannounced			
Inspection Date	Begin Time		End Time			
10/09/2025	9:00 AM	9:00 AM		9:00 AM 10:57 AM		
Reviewer:						
Sara Davis						
	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		ollment
	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	0
Older Toddler		0	0	0
Preschool		19	72	91
School Age		0	0	0
Total Capacity/Enrollment	114	19	72	91

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



Rm 17 Pre-K	4 years to < 5 years	2 to 19	
Rm 12 4's MWF	4 years to < 5 years	0 to 0	Not in Session
Rm 13 3's MWF	3 years to < 4 years	0 to 0	Not in Session
Rm 13 3's T,Th	3 years to < 4 years	2 to 15	
Rm 16 4's MWF	4 years to < 5 years	0 to 0	Not in Session
Rm 16 4's T,Th	4 years to < 5 years	2 to 9	

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 and 5180:2-13-03 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	
	٦
	_
Moderate Risk Non-Compliances	_
No Moderate Risk Non-Compliances were observed during this inspection	_



Low Risk Non-Compliances
No Low Risk Non-Compliances were observed during this inspection

Rules In-Compliance/Not Verified

5		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: Annual training of the written disaster plan was completed by staff.
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	ζ-η,,
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Building Department Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable



~~		
5180:2-12-03 Inspection	Compliant	
Requirements	3	
· ·	-	*
Rule	Status	Documenting Statement(s), If applicable
	- Constitution of the Cons	
Rule: 5180:2-12-04 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 8/28/2026.
		. , , , ,
	-	
Rule	Status	Documenting Statement(s), If applicable
	- Control of the Cont	
Rule: 5180:2-12-04 Food Service	Compliant	Documenting Statement: The program
Requirements		has obtained a food service exemption
		status from the local health department.
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	
Qualifications		
	J.	
Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(s), if applicable
5180:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-07 Written Program	Compliant	Documenting Statement: No changes
Policies and Procedures		have been made to the written policies
		and procedures since it was last approved
		by this Department.
		by this bepartment.
	I.	
D. I.	St. Luci	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Medical Statement	Compliant	
L		
	20 (6)	-
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Orientation Training &	Compliant	(-//=pp==
Whistle Blower Protection	Compilation	
Willistie blower Frotection		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
	1	O containing (1) it approach



5180:2-12-10 Health Training	Compliant	
Requirements		
Requirements		
2		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional	Compliant	
	Compilant	
Development Requirements		
×		
Rule	Status	Documenting Statement(s), If applicable
		Becamenting statement(s)) if approach
5180:2-12-11 Indoor Space	Compliant	
Requirements		
	3	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Space	Compliant	Documenting Statement: The quarterly
Requirements		playground inspections were completed
Control Annual Control		and documented, as required. The most
		recent inspection report form was dated
		8/16/2025.
	I	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Equipment	Compliant	
and the state of t	The second secon	
L	L	
	-	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	
	-	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Fall Zones	Compliant	
·	3	
2.1		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Environment	Compliant	
·-	1	1
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Sanitary Equipment and	Compliant	
Environment		
Z	I	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free	()	a production of the second of
orace ex	Compliant	
Environment		
Pulo	Status	Documenting Statement/s) If annihila
Rule	Status	Documenting Statement(s), If applicable



D 1 5400 2 42 44 T	6 1:	B
Rule: 5180:2-12-14 Transportation and	Compliant	Documenting Statement: The program
Field Trip Procedures		uses the ODJFS sample trip permission
		form for field trips to secure written
		permission from parents or guardians.
	i e	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 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.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 Medical/Physical	Compliant	Documenting Statement: The program
Care Plans		had current information on the medical
		status and the required treatment plan
		for the children with health conditions.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Decumenting Statement/s\ If applicable
100000000000000000000000000000000000000		Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
		during this inspection.
	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 First Aid/Standard	Compliant	
Precautions		
Dula	Chat	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury	Compliant	
Reporting	Johnshalle	
ha. 2010	L	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and	Compliant	
Equipment	10	
	51	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Schedule	Compliant	



nele	CICATO	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Attendance Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	5
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Ratio	Compliant	Documenting Statement(S), if applicable
3160.2-12-16 Natio	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-25 Medication	Compliant	Documenting Statement: The program
Administration	Compilant	had complete written documentation fo
, anning adol		administering medication or food
		supplements.
		Supplements