

## **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          |                 | Progr | ram Type          |
| Kidtopia                      | 2180018667              |                 | Child | Care Center       |
|                               |                         |                 |       |                   |
| Address                       |                         |                 | Count | ty                |
| 798 East 185th St Cleveland   | ast 185th St Cleveland  |                 |       | AHOGA             |
| OH                            |                         |                 |       |                   |
| 44119                         |                         |                 |       |                   |
|                               |                         |                 |       |                   |
| Building Approval Date        | Use Group/Code          | Occupancy Limit | N     | Maximum Under 2 ½ |
| 08/08/2018                    | Ē                       | 75              | 3     | 35                |
| Fire Inspection Approval Date | Food Service Risk Level |                 |       |                   |
| 03/08/2024                    | Level II                |                 |       |                   |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection                     | Scope            | Inspection Notice |              |
| Annual                 | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time                     |                  | End Time          |              |
| 09/12/2024             | 9:00 AM                        |                  | 12:52 PM          |              |
| Reviewer:              | Reviewer:                      |                  |                   |              |
| Michele Matheny        |                                |                  |                   |              |
|                        | 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)                                 |                  | 6          | 0         | 6     |
| Young Toddler   |                  | 3          | 0         | 3     |
| Total Under 2 ½ Years                                     | 35               | 9          | 0         | 9     |
| Older Toddler   |                  | 3          | 0         | 3     |
| Preschool   |                  | 11         | 0         | 11    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 72               | 14         | 0         | 23    |

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

| Infants   | 0 to < 12 months         | 2 to 4 |  |
|-----------|--------------------------|--------|--|
| Infants   | 0 to < 12 months         | 2 to 5 |  |
| Toddler   | 18 months to < 30 months | 2 to 6 |  |
| Toddler   | 18 months to < 30 months | 2 to 6 |  |
| Preschool | 3 years to < 4 years     | 2 to 8 |  |
| Preschool | 3 years to < 4 years     | 2 to 8 |  |

## **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 Bick Non Compliances   |  |
| 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  |
|------------------------------------|-----------|--|
| Rule: 5101:2-12-02 License Posted  | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-02 Current Information   | Compliant |  |
|                                    | 12        |  |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-03 Inspection            | Compliant |  |
| Requirements                       |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Building        | Compliant | Documenting Statement: A copy of the   |
| Department Inspection              | 8         | certificate of occupancy was available on-   |
|                                    |           | site for review.   |
|                                    |           |  |
| 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<br>be secured for the program. Secure a<br>new fire inspection by 3/8/25. |
|---|-------------------------------------|---|
|   |                                     |   |
| Rule  | Status                              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Food Service Requirements                  | Compliant                           | Documenting Statement: The food service license was observed posted. Following is                                 |
|   |                                     | the audit number and date of expiration: CAVT-D2HT8Z 3/2025.  |
| Rule  | Status                              | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator Qualifications                     | Compliant                           | bocamenting statement(s), it applicable   |
|   |                                     | D (1) (1) (1) (1)   |
| Rule 5101:2-12-07 Administrator Responsibilities/Requirements | Status<br>Compliant                 | Documenting Statement(s), If applicable   |
|   |                                     | D (1) (1) (1) (1)   |
| Rule: 5101:2-12-07 Written Program                            | Status<br>Compliant                 | Documenting Statement(s), If applicable  Documenting Statement: The written                                       |
| Policies and Procedures                                       | Compilant                           | policies and procedures reviewed on the   |
|   |                                     | day of the inspection were verified as complete.  |
|   | -                                   |   |
| Rule 5101:2-12-08 Medical Statement                           | Status<br>Compliant                 | Documenting Statement(s), If applicable   |
|   | Statisticalism Pare entrangelossoci |   |
| Rule  | Status                              | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant                           |   |
| Whistic Blower Frotection                                     |                                     |   |
| Rule  | Status                              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-09 Background Check                           | Compliant                           | Documenting Statement: During the   |
| Requirements  |                                     | inspection, the required documentation  |
|   |                                     | regarding background checks was on file for all employees listed.   |
|   |                                     |   |
| Rule  | Status                              | Documenting Statement(s), If applicable   |
| 5101:2-12-10 Health Training Requirements                     | Compliant                           |   |
|   |                                     |   |
| Rule  | Status                              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-10 Professional                               | Compliant                           | Documenting Statement: At the time of   |
| Development Requirements                                      |                                     | the inspection, all child care staff  |

|                                      |                     | members had completed the required amount of professional development training. |
|--------------------------------------|---------------------|---|
| Rule                                 | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space            | Compliant           | bocumenting statement(s), if applicable   |
| 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           | bocumenting statement(s), if applicable   |
| Requirements                         | Compilant           |   |
|                                      |                     |   |
| Rule                                 | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Play      | Compliant           | Documenting Statement: Outdoor  |
| Equipment                            |                     | equipment was viewed to be safe and   |
|                                      |                     | free of rust, sharp points, and other hazards.                                  |
|                                      |                     | Hazarus.  |
|                                      | J.                  |   |
| Rule                                 | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant           |   |
|                                      |                     |   |
| Rule                                 | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-12 Safe Equipment    | Compliant           | Documenting Statement: Equipment was  |
|                                      |                     | observed to be in good condition.   |
|                                      |                     |   |
| D.J.                                 | Chaban              | D   |
| Rule: 5101:2-12-12 Safe Environment  | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: Cleaning        |
| Naic. 5101.2 12 12 5aic Environment  | Compilant           | supplies were viewed stored out of the  |
|                                      |                     | reach of children.  |
|                                      |                     |   |
|                                      |                     |   |
| 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<br>Environment   | Compliant |  |
|--|-----------|--|
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-14 Transportation and  | Compliant | Documenting Statement: The program       |
| Field Trip Procedures  |           | uses the ODJFS sample trip permission    |
| ***  |           | form for [routine/field] trips to secure |
|  |           | written permission from parents or       |
|  |           | guardians.                               |
|  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-15 Child Medical and   | Compliant |  |
| Enrollment Records   |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-15 Medical/Physical  | Compliant | Documenting Statement: The program       |
| Care Plans   | Compliant | had current information on the medical   |
| Care Flairs  |           | status and the required treatment plan   |
|  |           | for the children with health conditions. |
|  |           | Tor the children with health conditions. |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Medical, Dental,  | Compliant | Documenting Statement: On the day of     |
| and General Emergency Plan   |           | the inspection, the complete prescribed  |
|  |           | JFS 01242 "Medical, Dental, and General  |
|  |           | Emergency Plan For Child Care" were      |
|  |           | posted in the program as required.       |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Emergency Drills  | Compliant | Documenting Statement: Documentation     |
|  |           | for completed fire, weather, and         |
|  |           | emergency/lockdown drills was verified   |
|  |           | during this inspection.                  |
| L  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 First Aid/Standard  | Compliant | Documenting Statement: During the        |
| Precautions  | ,         | inspection, the program had complete     |
| year articles and the Table Ta |           | first aid kits available as required.    |
|  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-16 Management of   | Compliant |  |
| Communicable Disease   |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Nuie   | Status    | Documenting statement(s), if applicable  |

| 5101:2-12-16 Incident/Injury       | Compliant |  |
|------------------------------------|-----------|--|
| Reporting                          |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-17 Daily Schedule  | Compliant | Documenting Statement: Daily schedules   |
| Nuie. 5101.2-12-17 Daily Scriedule | Соприан   | were observed posted.                    |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-17 Materials and         | Compliant | Documenting Statement(s), if applicable  |
| Equipment Equipment                | Compilant |  |
| 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 | Documenting Statement(s), if applicable  |
| 2101.2-12-10 Licelise Capacity     | Compliant |  |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-18 Ratio                 | 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 Attendance      | Compliant | Documenting Statement: During the        |
| Records                            | Compilant | inspection, attendance records were      |
|                                    |           | reviewed. Child Care Staff Members were  |
|                                    |           | viewed recording the attendance for each |
|                                    |           | child upon arrival and departure. All    |
|                                    |           | attendance records met the requirements  |
|                                    |           | of the rule and were kept with the group |
|                                    |           | at all times.                            |
|                                    |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-19 Supervision           | Compliant |  |
| Rule                               | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-19 Child Guidance  | Compliant | Documenting Statement: Appropriate       |
|                                    |           | child guidance techniques and practices  |
|                                    |           | were observed being used during the      |
|                                    |           | inspection.                              |
|                                    |           |  |

| 2 .  |           |  |
|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-20 Cots and Napping  | Compliant | Documenting Statement: The rest area       |
|  |           | had adequate lighting, which allowed for   |
|  |           | the visual supervision of children.        |
|  |           |  |
| Rule: 5101:2-12-20 Cots and Napping  | Compliant | Documenting Statement: Cots were           |
| 1100110  |           | placed appropriately and safely during     |
|  |           | nap time.                                  |
|  |           | NO 300 I C (000 P000 0 0 0 0 0             |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-20 Cribs   | Compliant | Documenting Statement: All cribs were      |
| The total and th |           | placed 2 feet apart.                       |
|  |           | p.a.co. 2 / Sociapa. n                     |
|  | l.        | '  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-22 Meal and Snack  | Compliant |  |
| Requirements   |           |  |
| moquii ememo   | 1         |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-22 Fluid Milk Requirements   | Compliant | bodinenting statement(s), it approase      |
| JIOI.2 12 22 Haid Will Requirements  | Compilant |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-22 Safe Food   | Compliant | became many state ment(s), in approache    |
| Handling/Storage   | Compilant |  |
| Handing/Storage  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
|  |           |  |
| Rule: 5101:2-12-23 Infant Daily Care   | Compliant | Documenting Statement: Appropriate         |
|  |           | daily written records for all infants were |
|  |           | viewed.                                    |
|  |           |  |
| D. J.  | Ct-t      | De sum entir Ci i i il la la               |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-23 Infant Bottle and Food  | Compliant |  |
| Preparation  |           |  |
|  | New Inc.  |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-23 Diapering and   | Compliant | Documenting Statement: Appropriate         |
| Toilet Training  |           | diaper changing procedures were            |
|  |           | observed during the inspection in the      |
|  |           | infant room.                               |
|  |           |  |
|  | •         |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-25 Medication  | Compliant |  |
| Administration   | ~         |  |
|  |           |  |



| Rule                                 | Status    | Documenting Statement(s), If applicable   |
|--------------------------------------|-----------|---|
| 5101:2-12-08 Child Care Staff Member | Compliant |   |
| Educational Requirements             |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Written Disaster  | Compliant | Documenting Statement: The program's      |
| Plan                                 |           | written disaster plan was reviewed during |
|                                      |           | the inspection and met the requirements.  |
|                                      | 7         |   |
|                                      |           |   |