Ohio 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 THINKING CAP CHILD CARE LLC	Program Number 000000300808	Program Type FCC - Type A Home
Address 8206 WADE PARK AVE CLEVELAND OH 44103		County CUYAHOGA

Inspection Information			
Inspection Type Compliance	Inspection Scope Full	Inspection Method On-site Inspection	Inspection Notice Unannounced
Inspection Date 05/29/2026	Begin Time 10:11 AM	End Time 12:30 PM	Reviewer: Renee Darling

Summary of Findings			
No. Requirements Verified 66	No. Requirements with Non-compliances 11		No. Requirements Compliant 54
No. Serious Risk 0	No. Moderate Risk Findings 1	No. Other Non-compliance Findings 10	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		1	0	1
Total Under 2 Years	6	1	0	1
Older Toddler		3	0	3
Preschool		3	0	3
School Age		0	0	0
Total Capacity/Enrollment	14	6	0	7

Staff-Child Ratios at the Time of Inspection				
Group	**Age Group/Range**	**Ratio Observed**	**Compliance**	**Comment**
Phyllis Wilson	Mixed Age Group	4 to 7	In Compliance	Ratio- 4:7 at 10:07am Ratio- 5:7 at 12:30 pm

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: **04 Indoor/Outdoor Space**

Rule: 5180:2-13-11 Fall Zone

Requirement: The program is required to have an adequate fall surface on the outdoor playground.

Finding: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in the following number 2 below:

1. No fall surface

2. Adequate fall surface to soften the impact of a fall

3. Other [ ]

Any equipment designed for climbing, swinging, bouncing, or sliding needs a fall zone of protective material resilient under and around the equipment in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/02/2026

Other Non-Compliances

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

Domain: 00 License & Approvals

Rule: 5180:2-13-02 Information in OCLQS

Requirement: The provider is required to keep their information current in OCLQS.

Finding: During the inspection, it was determined the information in number 2 below was not up to date in the Ohio Child Care Licensing and Quality System:

1. Mailing Address;

2. Telephone Number;

3. Email Address;

4. Days and Hours of Operation;

5. Services Offered;

6. Name of Program, If applicable.

7. Private pay rates.

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

Corrective Action Plan Due: 07/02/2026

Domain: **01 Ratio & Supervision**

Rule: 5180:2-13-18 Attendance

Requirement: The program is required to have a tracking method for children.

Finding: During the inspection, it was determined that the method for tracking the children in the group did not meet the requirements in rule as noted in the number 4 below:

1. There was no method in place.

2. The method did not include each child's name.

3. The method did not include each child's birthdate.

4. The tracking method did not remain with the group at all times.

5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 07/02/2026

Domain: **04 Indoor/Outdoor Space**

Rule: 5180:2-13-11 Outdoor Space

Requirement: The program staff is required to protect the children from hazardous conditions in the outdoor play area.

Finding: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number 15 below:

1. There was broken glass.

2. There were tall weeds.

3. There was poison ivy.

4. There were tree branches.

5. There was mold visible.

6. The sandbox was contaminated.

7. There were thistles with prickers.

8. There were bird droppings.

9. The outdoor area was littered with trash.

10. The trash can was missing a lid.

11. The trash was not emptied from the day(s) before.

12. The trash can was overflowing with trash.

13. The trash can was infested with insects.

14. The trash can was visibly dirty.

15. Other The onsite outdoor equipment needs cleaning in the backyard .

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

Corrective Action Plan Due: 07/02/2026

Domain: **07 Diapering & Infant Care**

Rule: 5180:2-13-20 Crib and Playpen Requirements

Requirement: The program is required to provide mattresses in good condition and sheets that are not too large or too small for cribs and playpens.

Finding: During the inspection, it was determined that sheets, mattresses and/or mattress covers did not meet the rule requirement as noted in number 2 below:

1. At least one crib or playpen did not have a sheet.

2. At least one sheet was too large.

3. At least one sheet was too small.

4. At least one sheet was torn.

5. The mattress was not at least one and one-half inches thick.

6. The mattress was not firm.

7. There was space between the mattress and the sides and end panels of the crib or playpen which exceeded one and one-half inches.

8. The mattress cover was not waterproof.

9. The mattress cover was torn.

10. Other: [ ].

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

Corrective Action Plan Due: 07/02/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-08 Child Care Staff Requirements

Requirement: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member or substitute child care staff member did not meet the requirements for completing the online orientation training as noted in number 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.

2. No documentation of completing the training after December 31, 2016.

3. Completion of the training was not verified in the OPR.

4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 07/02/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-10 Health Training

Requirement: The program is required to meet the health training requirements.

Finding: In review of records, it was determined the CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training(s) listed in numbers 12, 15 below:

1. First Aid - expired training

2. First Aid - did not have verification of completion of First Aid training

3. First Aid - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

4. CPR - expired training

5. CPR - had not taken CPR training

6. CPR - did not have verification of the completion of CPR training

7. CPR - training taken did not include all age groups the program serves and developmental levels of all children in care

8. CPR - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

9. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training

10. Communicable Disease - expired training

11. Communicable Disease - had not taken CD training

12. Communicable Disease - did not have verification of the completion of the CD training

13. Communicable Disease - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

14. Child Abuse - expired training

15. Child Abuse - had not taken Child Abuse training

16. Child Abuse - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

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

Corrective Action Plan Due: 07/02/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-08 Employee Requirements

Requirement: The program is required to obtain completed medical statements for all program staff.

Finding: In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number 1

1. A medical statement was not on file;

2. The medical statement(s) on file were not dated within 12 months of the individual's first day of employment;

3. Date of examination was missing;

4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;

5. A statement was missing that verifies the individual is:

a. Physically fit for employment in a program caring for children;

b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);

c. Immunized against Measles, Mumps, and Rubella (MMR);

Submit the program's corrective action plan, which includes a copy of the completed medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/02/2026

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 11 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: The CCSM's and Provider hours does not cover 24 hours of care during the evening or weekend.

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

Corrective Action Plan Due: 07/09/2026

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 3 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: 07/09/2026

Domain: **09 Children's Files**

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Requirement: The program is required to have a completed medical on file for each child.

Finding: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 2 below:

1. No medical was on file for at least one child

2. Medical(s) on file was not updated every 13 months

3. Medical(s) were missing child's name and date of birth

4. Medical(s) were missing the date of the medical examination

5. The date of the exam was more than 13 months prior to the date the form was signed

6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care

7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified

nurse practitioner (CNP) who examined the child

8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year

9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases

required by division 5104.014 of the Revised Code and found in appendix A to this rule

10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of

conscience, including religious convictions

11. Other [ ]

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

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Corrective Action Plan Due: 07/02/2026

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.

Department of Children & Youth

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 Provider Medical	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Type A Ownership	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 Inspections for Type A Homes	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Fire Inspections for Type A 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 Written Policies and Procedures	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-09 Background Checks	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 Outdoor Equipment	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 Safe Environment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	

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

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	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 Requirements for Field and Routine Trips	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 Smoke Free	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 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 Medical, Dental, and General Emergency Plan	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
5180:2-13-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 School Age Supervision	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 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 Meals and Snacks	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 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 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
5180:2-13-25 Medication Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Indoor Space	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 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
5101:2-13-08 Review Policies and Procedures	Compliant	