

Family Child Care 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 Marvellous Minds	Program Number 2230028281	Program Type FCC - Type B Home
Address 441 S. Pine Lima OH 45804		County ALLEN

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 04/07/2026	Begin Time 6:00 PM	End Time 7:50 PM
Reviewer: Riley Smith		

Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 4	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 5

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		Total
	Totals	Full Time	Part Time	
Infant (Birth to < 18 m)		0	0	0
Young Toddler		1	0	1
Total Under 2 Years	3	1	0	1
Older Toddler		0	0	0
Preschool		2	0	2
School Age		2	0	2
Total Capacity/Enrollment	7	4	0	5

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Mixed Age Group		1 to 2	Arrival- 6:00 PM- 2 children Departure- 7:50 PM- 2 children

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 Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-13 Clean environment and equipment

Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following number(s) 5 below, were in the restroom:

1. There was no liquid soap.
2. There was no toilet tissue.
3. There were no individually assigned towels or disposable towels.
4. The toilet cleaning brush was accessible to the children.
5. The plunger was accessible to the children.
6. The toilet was not flushed.
7. The trash was not emptied from the day before.
8. There was a strong urine odor.
9. Other [].

The restroom(s) must be kept sanitary at all times. Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/08/2026

Domain: 05 Health & Safety

Rule: 5180:2-13-16 First Aid Kit/Standard Precautions

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit [onsite/ on the vehicle/ on a field trip] as required, that included all items listed in the appendix A of the rule. The kit(s) were missing the item(s) or the item(s) were not replaced after use and/or expired listed in number(s) 4, 5, 7, 14 below:

1. One roll of first-aid tape;
2. Individually wrapped sterile gauze;
squares in assorted sizes;
3. Sterile adhesive bandages in assorted sizes;
4. Tweezers;
5. Gauze rolled bandage;
6. Triangular bandage;
7. Rounded end scissors;
8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);
9. A working digital thermometer;
10. Disposable non-latex gloves;
11. A working flashlight;
12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;
13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;
14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
15. Soap or waterless sanitizer (field trip or transporting away from the program only);

16. Bottled water (field trip or transporting away from the program only).

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

Corrective Action Plan Due: 05/08/2026

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Communicable Diseases

Code: The program is required to post the Ohio Communicable Disease Chart in a noticeable area.

Findings: During the inspection, it was determined that the Ohio Communicable Disease Chart was not posted as required , as indicated in the number(s) 3 below:

1. In a location readily available to provider, child care staff members, employees, and residents;
2. The chart was not posted.
3. The posted chart was not the current version.
4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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

Corrective Action Plan Due: 05/08/2026

Domain: 09 Children's Files

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

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 4,5,6 below:

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature

12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other []

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

Corrective Action Plan Due: 05/08/2026

Domain: 09 Children's Files

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

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

Findings: 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(s) 10 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.

Corrective Action Plan Due: 05/08/2026

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Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary Closure	Compliant	
5180:2-13-02 License Visible	Compliant	
5180:2-13-02 Change of Location	Compliant	
5180:2-13-02 Information in OCLQS	Compliant	
5180:2-13-02 Provider Medical	Compliant	
5180:2-13-03 Inspection Requirements	Compliant	
5180:2-13-04 Building Requirements for Type B Homes	Compliant	
5180:2-13-04 Fire Safety for Type B Homes	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5180:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-05 Denial, Revocation, and Suspension	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Staff Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Provider Responsibilities	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Type B Provider - Foster Parent	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff Requirements	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 Health Training	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 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	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 Carbon Monoxide Detectors - Type B Only	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 Smoke Free	Compliant	
5180:2-13-13 Handwashing	Compliant	
5180:2-13-13 Toothbrushing	Compliant	
5180:2-13-14 Requirements for Field and Routine Trips	Compliant	
5180:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	
5180:2-13-14 Driver Requirements	Compliant	
5180:2-13-14 Vehicle Inspections	Compliant	
5180:2-13-14 Vehicle Requirements	Compliant	
5180:2-13-15 Health Conditions	Compliant	
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 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
5180:2-13-18 Attendance	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
5180:2-13-21 Evening and Overnight Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap Requirements	Compliant	
5180:2-13-19 Child Guidance	Compliant	
5180:2-13-20 Crib and Playpen Requirements	Compliant	
5180:2-13-21 Sanitary Environment and Hygiene	Compliant	
5180:2-13-22 Meals and Snacks	Compliant	
5180:2-13-22 Food Handling	Compliant	
5180:2-13-22 Fluid Milk	Compliant	
5180:2-13-23 Infant Daily Care	Compliant	
5180:2-13-23 Infant Bottle and Food Preparation	Compliant	
5180:2-13-23 Diapering	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
5180:2-13-25 Medication Requirements	Compliant	