

Center Complaint Inspection Summary 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 THE BEEHIVE DAYCARE LLC	Program Number 2210025380	Program Type Child Care Center
Address 131 North East Street Medina OH 44256		County MEDINA

Inspection Information				
Inspection Type Complaint			Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) DIANE TRACZYK		Inspection Day 07/29/2025	Begin Time 9:45 AM	End Time 11:30 AM
Summary of Findings				
No. Rules Verified 4	No. Rules with Non-compliances 2	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 2

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infant/Toddler Group	12 months to < 18 months	2 to 5	Arrival
Preschool Group	30 months to < 36 months	1 to 8	Arrival
School-Age Group	School-Age to < 11 years	1 to 10	Arrival

Complaint Allegations

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.

Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Child Guidance

Code: The program staff shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Allegation: Complainant alleged that inappropriate methods of behavior guidance was used.

Determination: Substantiated

Findings: During the inspection, it was determined that a child care staff member used a discipline technique to guide or discipline children that was not developmentally appropriate. Provide staff training regarding child guidance and the specifics of the rule/ program policies. Submit the program's corrective action plan, which includes a statement that child guidance training was provided to all staff, to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 08/30/2025

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Additional Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5180:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 7 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival to the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 08/30/2025