



Family Child Care 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 Busy Bees' Beehive	Program Number 2240030318	Program Type FCC - Type B Home
Address 6138 HEDGE AVE. Cincinnati OH 45213		County HAMILTON

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Lindsey Sweeney	Inspection Day 09/30/2025	Begin Time 10:00 AM	End Time 12:00 PM

Summary of Findings				
No. Rules Verified 10	No. Rules with Non-compliances 7	No. Serious Risk 0	No. Moderate Risk 2	No. Low Risk 6

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
9/30/25	Mixed Age Group	1 to 3	
9/30/25		1 to 0	

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: 05 Health & Safety

Rule: 5180:2-13-16 Incident/Injury

Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Allegation: Allegation: Provider does not give incident reports.

Determination: Substantiated

Findings: In review of the records, it was determined the program did not meet the requirements for completing a JFS 01299 "Incident/Injury Report" as noted in number 5 below:

1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
2. The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
3. The JFS 01299 was not completed when a child received a bump or blow to the head.
4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program.
5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
6. The program information (program name, number, address) was incomplete on the JFS 01299.
7. Child's name was incomplete on the JFS 01299.
8. Child's birthdate was incomplete on the JFS 01299.
9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
11. Date and/or time of the incident was incomplete on the JFS 01299.
12. Whether or not parents were contacted was incomplete on the JFS 01299.
13. Complete summary of the incident was incomplete on the JFS 01299.
14. Accurate summary of the incident was incomplete on the JFS 01299.
15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
16. The JFS 01299 was not kept on file at the program for at least one year.
17. Other [].

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

Risk Level: Low

Corrective Action Plan Due: 10/30/2025

Domain: 08 Staff Files

Rule: 5180:2-13-07 Provider Responsibilities

Code: 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.

Allegation: Allegation: Provider has a nursing job during the hours of daycare.

Determination: Substantiated

Findings: During the inspection, it was determined that the provider was not meeting the following requirements as noted in number 2 below :

1. The provider no longer resides at the licensed location.
2. The licensed provider has additional activities/employment during operating hours, in that the provider works a nursing job at night, the hours of the childcare is 24/7.
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.

Risk Level: Low

Corrective Action Plan Due: 10/30/2025

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

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

Moderate Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Group Size and Ratios

Code: The program is required to monitor the number of children in care to remain within the licensed capacity.

Findings: During the inspection, it was determined there were 8 children in care during the hours of operation, which is over the capacity listed on the license. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/30/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing potentially hazardous items, toxic substances, and outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored where children present had access to it as noted in number(s) [] below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in 1, 2

1. Bleach.
2. Cleaning agent.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.
6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.
14. Other potentially hazardous substance, equipment or machinery: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/30/2025

Low Risk Non-Compliances**Domain: 00 License & Approvals**

Rule: 5180:2-13-02 License Visible

Code: The program is required to have their license in a visible area.

Findings: During the inspection, it was determined the provider's license was not in a location visible to parents, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/30/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Findings: Children in care shall be protected from any items and conditions which threaten their health, safety, and well being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well being as noted in the following number 1 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.
6. Telephone cords.
7. Employee(s) purse(s).
8. Diaper bags.
9. Television not securely anchored.
10. Small or lightweight pieces of shelving units are not securely anchored to the wall.
11. Staff member stepped over a barrier/gate while holding a child.
12. Chipping or peeling paint.
13. An area rug did not have a nonskid backing.
14. An area rug presented a tripping hazard.
15. A floor surface was unsafe in that [].
16. No platform was provided for the sink or toilet.
17. The platform provided for the sink or toilet was not sturdy.
18. The platform provided for the sink or toilet posed a safety hazard in that [].
19. Emergency exits were blocked by the following furniture in that [].
20. A mercury thermometer was being used to take a child's temperature.
21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
22. Other [].

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

Corrective Action Plan Due: 10/30/2025

Domain: 03 Postings & Equipment

Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number 1 below:

1. The plan was not posted on each level of the home used for child care.
2. The name, address and telephone number of the program were not complete.
3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
4. The telephone number for emergency squad, fire department hospital, poison control program, public children services agency, local health department, local emergency management agency and police department were not complete.
5. Location of children's records was not complete.
6. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
7. The current version of the prescribed form was not used.
8. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 10/30/2025

Domain: 03 Postings & Equipment

Rule: 5180:2-13-17 Programming

Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not posted in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 10/30/2025