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CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Information

Provider Type: LICENSED TYPE I

Capacity: 46

CLR No: 1383335

Owner(s): Miss Barbara's Day Care Llc

Provider Address: 1366 South Laurel Road, London, KY, 40744

Provider Name: Miss Barbara's Day Care

Director(s): Hatfield, Benita Mae

Inspection Information

Inspection Type: Renewal Application Date Initiated: 01/29/2019 9:30 AM

Date Concluded: 01/29/2019 12:30 PM

No. of Children Present: 25

Inspection No: 247612

Inspection Report

Background Checks

Not In Compliance

5 - Background check/left alone/dismissed/relocated

Not In Compliance

922 KAR 2:280. Section 3. Implementation and Enforcement.

- (1) A person who is a child care staff member prior to January 1, 2018, shall submit to and complete background checks in accordance with this administrative regulation no later than September 30, 2018.
- (2) A child care staff member hired on or after April 1, 2018, shall:
- (a) Have completed the background checks required in accordance with this administrative regulation and been found to have no disqualifying offense prior to becoming a child care staff member; or
- (b)1. Have submitted to the background checks required in accordance with this administrative regulation;
- 2. Not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative regulation: and
- 3. Be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.

Findings:

General: Based on review of documentation and interview, the following were found:

- 1. The surveyor was not presented with background check results submitted through the Kentucky National Background Check Program (NBCP) for an owner (DOH: 1/12/15).
- 2. The surveyor was not presented with background check results submitted through the (NBCP) for an owner (DOH: 8/4/16).
- 3. The surveyor was not presented with background check results submitted through the (NBCP) for an administrative staff member (DOH: 4/12/17).

The surveyor did not observe the owners or administrative staff working alone with the children. The Director stated that the owners or the administrative staff do not work with the children. The Director explained that she was not aware that the owners and the administrative staff also needed to submit to the new background check process

4. The surveyor was not presented with background check results submitted through the Kentucky National Background Check Program (NBCP) for a volunteer (Start Date: 11/12/15). The volunteer's original Child Abuse/Neglect and Criminal Records Background Checks were on file; therefore, she was not working alone without background checks. The Director confirmed through interview that the individual was a volunteer; however, the surveyor observed the volunteer acting in the role of a staff person by changing diapers.

Supervision

In Compliance

Staffing Requirements

In Compliance

General Administration

In Compliance



Inspection Report

Director Requirements

Not In Compliance

340 - Staff Meeting Not In Compliance

922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

- (1) A director shall:
- (i) Conduct, manage, and document in writing recurring staff meetings;

Findings:

General: Based on review of documentation and interview, the suveyor was only presented with documentation for one (1) staff meeting held within the past year. The Director stated that there had been more staff meetings but she did not located the documentation of them at time of inspection.

345 - Staff Evaluation Not In Compliance

922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

- (1) A director shall:
- (j) Assess each staff person's interaction with children in care and classroom performance through an annual written performance evaluation;

Findings:

General: Based on review of documentation and interview, the surveyor was presented with the following:

- 1. A staff file (DOH: 10/13/14) contained an annual evaluation that was last updated on 10/11/17.
- 2. A staff file (DOH: 3/20/15) did not contain documentation of an annual evaluation.
- 3. A staff file (DOH: 7/28/16) contained an annual evaluation that was last updated on 10/23/17.

The Director stated she was aware that staff evaluations needed to be updated annually.

350 - Health, Safety, Comfort Not In Compliance

922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

- (1) A director shall:
- (I) Assure the health, safety, and comfort of each child;

Findings:

General: Based on observation and interview, the surveyor found that the children's backpacks and coats were hanging on pegs in the hallway. The children's items were touching thus presenting a risk of cross contamination. The Director stated that she was aware of this concern and had placed signs inside the center instructing parents to not hang the children's items up so that they are touching others.

Employee Records Not In Compliance

390 - Educational Requirements

Not In Compliance

922 KAR 2:090. Section 11. Staff Requirements.

- (1) Child-care center staff:
- (a) Hired after January 1, 2009, who have supervisory power over a minor and are not enrolled in secondary education, shall have a:
- 1. High school diploma:
- 2. GED or qualifying documentation from a comparable educational entity; or
- 3. Commonwealth Child Care Credential as described in 922 KAR 2:250;

Findings:

General: Based on review of documentation and interview, the surveyor was presented with the following:

- 1. A staff file (DOH: 12/3/18) did not contain documentation of education in the form of a high school diploma, GED, or Commonwealth Child Care Credential.
- 2. A staff file (DOH: 10/8/18) did not contain documentation of education in the form of a high school diploma, GED, or Commonwealth Child Care Credential.

The Director confirmed that documentation of education had not been obtained for the staff files.

395 - TB Verification Not In Compliance

922 KAR 2:090. Section 11. Staff Requirements.

- (1) Child-care center staff:
- (b) Shall provide, prior to employment and every two (2) years thereafter:
- 1. A statement from a health professional that the individual is free of active tuberculosis; or
- 2. A copy of negative tuberculin results.

Findings

General: Based on review of documentation and interview, the surveyor was presented with the following:

- 1. A volunteer file (Start Date: 6/26/17) contained documentation of a tuberculin skin test that was not complete. The documentation had not been completed to show the date it was interpreted by medical professional or the results. The Director stated she was not aware that the information was missing from the documentation.
- 2. A staff file (DOH: 1/28/19) did not contain documentation of a negative tuberculin skin test or documentation from a medical professional stating that the staff member was free from active tuberculosis. The Director confirmed that the staff member had just started working and had not submitted a negative tuberculosis skin test yet.



410 - Training Not In Compliance

922 KAR 2:090. Section 11. Staff Requirements.

- (16) In accordance with KRS 199.896(15) and (16), a staff person with supervisory authority over a child shall complete the following:
- (a) Six (6) hours of cabinet-approved orientation within the first three (3) months of employment;
- (b) Nine (9) hours of cabinet-approved early care and education training within the first year of employment, including one and one-half (1 $\frac{1}{2}$) hours of cabinet-approved pediatric abusive head trauma training; and
- (c) Fifteen (15) hours of cabinet-approved early care and education training during each subsequent year of employment, including one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training completed once every five (5) years.

Findings:

General: Based on review of documentation, review of ECE-TRIS, and interview, the following were found:

- 1. A staff file (DOH: 10/13/14) was presented for review that only contained annual training documentation for nine (9) hours of annual training for 10/13/17 10/12/18. Review of ECE-TRIS, confirmed that only nine (9) hours of annual training had been completed. The Director stated that the staff member had informed her she had completed all of her annual training.
- 2. A staff file (DOH: 10/8/18) presented for review did not contain documentation of orientation training. Review of ECE-TRIS, revealed that the staff member was not entered in TRIS. The Director stated that the staff member had been off work some for illness/maternity leave so she had not made the staff member take the orientation training yet.
- 3. A volunteer (Start Date: 11/15/15) file presented for review did not contain documentation of six (6) hours of orientation training, Pediatric Abusive Head Trauma Training, or fifteen (15) hours of annual training. Review of ECE-TRIS, revealed that the individual was not active in ECE-TRIS. The Director confirmed in interview that the individual was a volunteer; however, the surveyor observed the individual acting in the role of a staff person.

Programming

Not In Compliance

420 - Program of Activities Followed

Not In Compliance

922 KAR 2:120. Section 2. Child Care Services.

- (4) The child-care center shall provide a daily planned program:
- (a) Posted in writing in a conspicuous location with each age group and followed;
- (b) Of activities that are individualized and developmentally appropriate for each child served;
- (c) That provides experience to promote the individual child's physical, emotional, social, and intellectual growth and well-being; and
- (d) Unless the child-care center is a before- or after-school program that operates part day or less, that offers a variety of creative activities including:
- 1. Art or music;
- 2. Math or numbers;
- 3. Dramatic play;
- 4. Stories and books;
- 5. Science or nature:
- 6. Block building or stacking;
- 7. Tactile or sensory activity;
- 8. Multi-cultural exposure;
- 9. Indoor or outdoor play in which a child makes use of both small and large muscles;
- 10. A balance of active and quiet play, including group and individual activity;
- 11. An opportunity for a child to:
- a. Have some free choice of activities;
- b. If desired, play apart from the group at times;

Findings:

General: Based on observation and interview, the surveyor found the following:

- 1. The lesson plan posted in the One's Classroom was dated for 1/21/19 1/25/19. Staff stated they were not aware if there was an updated lesson plan or not.
- 2. There was no lesson plan posted in the School-Age Classroom. Staff was not aware if there was an updated lesson plan.
- 3. The lesson plan posted in the Pre-K Classroom was dated for 1/21/19 1/25/19. Staff stated they did not have an updated lesson plan.

Premises

Not In Compliance

565 - 35 Square Feet per Child 922 KAR 2:120. Section 4. Premises Requirements.

Not In Compliance

(6) Exclusive of the kitchen, bathroom, hallway, and storage area, there shall be a minimum of thirty-five (35) square feet of space per child.

Findings:

Based on observation and interview, the surveyor found that there were fourteen (14) children present in the Pre-K Classroom. Per the center's diagram, the Pre-K Classroom only measures for a maximum capacity of eleven (11) children. There was not thirty-five (35) square feet available for each child. The Director stated she was not aware of the classroom's capacity.

580 - Floors, Walls, Ceilings

Not In Compliance

922 KAR 2:120. Section 4. Premises Requirements.

(9) Floors, walls, and ceilings shall be smooth, in good repair, and constructed to be easily cleaned.

Findings:

General: Based on observation and interview, the surveyor found that there were two (2) ceiling tiles located in the Toddler Classroom that had sustained water damage as evidence by them having large brown stains on them. Staff stated that the stains were from a leak in the roof and that the entire building was in need of a new roof.



Inspection Report

Hygienic Practices

Not In Compliance 660 - Staff Hygiene/Handwashing Not In Compliance

922 KAR 2:120. Section 3. General Requirements.

- (5) Staff shall:
- (a) Maintain personal cleanliness;
- (b) Conform to hygienic practices while on duty;
- (c) Except as established in paragraph (d) of this subsection, wash their hands with liquid soap and running water:
- 1. Upon arrival at the center;
- 2. After toileting or assisting a child in toileting;
- 3. Before and after diapering each child;
- 4. After wiping or blowing a child's or own nose;
- 5. After handling animals;
- 6. After caring for a sick child;
- 7. Before and after feeding a child or eating;
- 8. Before dispensing medication;
- 9. After smoking or vaping; and
- 10. If possible, before administering first aid; and

(d) Use hand sanitizer or hand-sanitizing wipes if liquid soap and warm running water are not available in accordance with paragraph (c) of this subsection. The staff shall wash the staff's hands as soon as practicable once liquid soap and warm running water are available.

General: Based on observation and interview, the surveyor observed a staff member in the One's Classroom fail to wash their hands with soap and water after wiping a child's soiled nose. The staff member proceded to interact with the other children in the room. Staff stated they are aware that they should be washing their hands with soap and water after cleaning a child's nose.

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance

Equipment

Not In Compliance Not In Compliance

922 KAR 2:120. Section 11. Toys and Furnishings.

- (1) All toys and furniture contacted by a child shall be:
- (a) Kept clean and in good repair; and
- (b) Free of peeling, flaking, or chalking paint.

815 - Toys/Furniture

General: Based on observation and interview, the surveyor observed a smear of a reddish purple substance on the shelf above the blocks in the Toddler Classroom. Staff stated that the shelves are wiped down daily and the substance could be strawberries from breakfast.

Transportation

Not Applicable

Food Service/Food Program **Food Service**

In Compliance In Compliance

Children's Records

Not In Compliance

1135 - Immunization **Not In Compliance**

922 KAR 2:090. Section 9. Records.

- (1) A child-care center shall maintain:
- (a) A current immunization certificate for each child in care within thirty (30) days of the child's enrollment, unless an attending physician or the child's parent objects to the immunization of the child pursuant to KRS 214.036;

Findings:

General: Based on review of documentation and interview, the surveyor was not presented with current immunization certificates for the following:

- 1. A child's file (DOE: 2/13/18) contained an immunization certificate that was current through 9/3/18.
- 2. A child's file (DOE: 8/6/18) only contained an immunization record and not the immunization certificate.
- 3. A child's file (DOE: 2/27/17) contained an immunization certificate that was current through 10/5/18.
- 4. A child's file (DOE: 9/10/18) did not contain an immunization certificate.

The Director was not aware of the missing immunization certificates or those that were no longer current.

Written Documentation

Not In Compliance Not In Compliance

1150 - Evacuation Plan

922 KAR 2:090. Section 5. Evacuation Plan.

(1) A licensed child-care center shall have a written evacuation plan in the event of a fire, natural disaster, or other threatening situation that may pose a health or safety hazard for a child in care in accordance with KRS 199.895 and 42 U.S.C. 9858c(c)(2)(U).

General: Based on review of documentation and interview, the surveyor was presented with an emergency preparedness plan that had last been reviewed in November of 2017. The Director stated that she was not aware that the plan had to be reviewed annually by the end of each year.



Inspection Report

1160 - Daily Attendance Records

Not In Compliance

922 KAR 2:090. Section 9. Records.

- (1) A child-care center shall maintain:
- (c) Daily attendance records documenting the arrival and departure time of each child, including records that are required in accordance with 922 KAR 2:160, Section 13, if a child receives services from the child-care center through the Child Care Assistance Program;
 - Findings:

General: Based on review of documentation, observation, and interview, the surveyor found that only nineteen (19) of the twenty-five (25) children present at the center had been signed in on the daily attendance record. The Director reported that it is difficult to get parents to remember to sign their children in and out.

1170 - Professional Development

Not In Compliance

- 922 KAR 2:090. Section 9. Records.
- (1) A child-care center shall maintain:
- (f) A written annual plan for child-care staff professional development;

Findings:

General: Based on review of documentation and interview, the surveyor was presented with the following:

- 1. A staff file (DOH: 10/13/14) contained an annual professional development plan that was last updated on 10/13/17.
- 2. A staff file (DOH: 3/20/15) contained an annual professional development plan but it had not been dated; therefore, the surveyor could not determine if the plan was current.
- 3. A staff file (DOH: 7/28/16) contained an annual professional development plan that was last updated on 10/20/17.
- 4. A staff file (DOH: 12/18/14) contained an annual professional development plan that was last updated on 11/16/17.

The Director stated she was aware that professional development plans needed to be updated annually.

1175 - Earthquake/Tornado/Fire Drills

Not In Compliance

922 KAR 2:090. Section 9. Records.

- (1) A child-care center shall maintain:
- (h) A written record of quarterly practiced earthquake drills and tornado drills detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3;
- (i) A written record of practiced fire drills conducted monthly detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3;

Findings:

General: Based on review of documentation and interview, the surveyor was not presented with documentation of a fire drill for the month of December 2018. The Director stated that a fire drill had been conducted but it had not been documented.

Posted Documentation

In Compliance

Animals

In Compliance



Title