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**Inspection Report**

<b>Provider Name:</b> Pleasant Grove Elementary YMCA Before & After School Child Care	<b>Provider Information</b> <b>Provider Type:</b> LICENSED TYPE I	<b>CLR No:</b> L355967
<b>Provider Address:</b> 6415 Highway 44 E, Mt. Washington, KY, 40047		<b>Capacity:</b> 125
<b>Owner(s):</b> Young Men's Christian Association Of Great Louisville		<b>Director(s):</b> Bryant, Sharon Kay

<b>Inspection Type:</b> Renewal Application	<b>Inspection Information</b>	<b>Inspection No:</b> 321716
<b>Date Initiated:</b> 07/14/2022 2:05 PM	<b>Date Concluded:</b> 07/14/2022 3:30 PM	
	<b>No. of Children Present:</b> 64	

Inspection Report	
Background Checks	Not In Compliance
<b>5 - Background check/left alone/dismissed/relocated</b>	<b>Not In Compliance</b>
<p><b>922 KAR 2:280. Section 3. Implementation and Enforcement.</b></p> <p><b>(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.</b></p> <p><b>(2) A child care staff member hired on or after April 1, 2018, shall:</b></p> <p><b>(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></p> <p><b>(b)1. Have submitted to the background checks required in accordance with this administrative regulation;</b></p> <p><b>2. Not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative regulation; and</b></p> <p><b>3. Be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.</b></p>	
<b>Findings:</b>	
<p>General: Based on review of documentation, the surveyor found that a staff's (DOH: 12/13/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service. Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check. A review of documentation indicated the staff person recently turned eighteen (18) years of age. The staff's file did not contain a completed Child Abuse/Neglect Background Check (CAN). The staff's file contained documentation to show that a CAN was submitted. The staff's file contained a completed Criminal Records Background Check (CRC) dated 09/08/21. During interview, staff-in-charge stated that the CAN was completed; however, the documentation was not at the center. Staff-in-charge stated that the staff person was scheduled to submit fingerprints. Staff-in-charge stated that the staff person has not worked alone with children. The surveyor did not observe the staff person working alone with children.</p>	
<b>Supervision</b>	<b>In Compliance</b>
<b>Staffing Requirements</b>	<b>In Compliance</b>

**Inspection Report**

**General Administration**

**Not In Compliance**

**225 - Licensee Responsibility**

**Not In Compliance**

**922 KAR 2:090. Section 8. General.**

**(1) A licensee shall:**

- (a) Be responsible for the operation of the child-care center pursuant to this administrative regulation, 922 KAR 2:120, and 922 KAR 2:280; and**
- (b) Protect and assure the health, safety, and comfort of each child.**

**Findings:**

General: Based on review of documentation, the surveyor found that a staff's (DOH: 06/06/22) file did not contain documentation of a completed Child Abuse/Neglect Background Check (CAN). A review of documentation indicated that the staff person was seventeen (17) years of age. The staff's file contained a completed Criminal Records Background Check dated 05/04/22 and a completed background through Praesidium. During interview, staff-in-charge stated that a CAN check was completed for the staff person; however, the documentation was not at the center. Staff-in-charge stated that the staff person has not worked alone with children. The surveyor did not observe the staff person working alone with children.

**Director Requirements**

**Not In Compliance**

**360 - 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, the surveyor found that a staff's (DOH: 09/28/12) file contained an annual written performance evaluation dated 11/08/20; therefore, the evaluation was not completed annually. During interview, staff-in-charge stated that the written performance evaluation was completed for the staff person; however, the documentation was not available for review.

**Employee Records**

**Not In Compliance**

**395 - Personnel File**

**Not In Compliance**

**922 KAR 2:090. Section 9. Records.**

**(1) A child-care center shall maintain:**

**(e) A current personnel file for each child-care center staff person to include:**

- 1. Name, address, date of birth, and date of employment;**
- 2. Proof of educational qualifications;**
- 3. Record of annual performance evaluation;**
- 4. Documentation of compliance with tuberculosis screening in accordance with Section 11(1)(b) of this administrative regulation; and**
- 5. The results of background checks conducted in accordance with 922 KAR 2:280;**

**Findings:**

General: Based on review of documentation, the surveyor found that a staff's (DOH: 06/06/22) file did not contain verification of a High School Diploma, GED or Commonwealth Child Care Credential.

**435 - 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 completed within the first three (3) months of employment in a child-care program;**
- (b) Nine (9) hours of cabinet-approved early care and education training within the first year of employment in a child care program, including one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training; and**
- (c) Fifteen (15) hours of cabinet-approved early care and education training completed between July 1 and the following June 30 of each subsequent year of employment in a child care program, including one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training completed once every five (5) years.**

**(17) A staff person's compliance with training requirements of this section shall be verified through the cabinet-designated database maintained pursuant to 922 KAR 2:240.**

**Findings:**

General: Based on review of ECE-TRIS, the surveyor found the following:

1. A staff (DOH: 01/14/22) obtained zero (0) hours of the required six (6) hours of cabinet-approved orientation training; therefore, the training was not completed within the first three (3) months of employment.
2. A staff (DOH: 05/04/17) obtained four (4) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/2021 – 06/30/22.

**Programming**

**In Compliance**

**Inspection Report**

**Premises**

**Not In Compliance**

**565 - Inaccessible Items**

**Not In Compliance**

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

- (7) The following shall be inaccessible to a child in care:**
  - (a) Toxic cleaning supplies, poisons, and insecticides;**
  - (b) Matches, cigarettes, lighters, and flammable liquids; and**
  - (c) Personal belongings and medications of staff.**

**Findings:**

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

1. A bottle of Xcelente Multi Surface Cleaner was placed on the bottom of a rolling cart located in the Cafeteria that read, "Keep Out of the Reach of Children," on the label.
2. Two (2) bottles of Sol-U-Guard Botanical were placed on a small brown storage organizer that was located on a brown table in the Library and read, "Keep Out of the Reach of Children," on the labels.
3. A bottle of Tough and Tender All Purpose Cleaner was placed on a counter top in the Library that read, "Keep Out of the Reach of Children," on the label.

The items mentioned were observed to be within reach of the children.

**585 - Premises Requirements**

**Not In Compliance**

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

- (1) The premises shall be:**
  - (a) Suitable for the purpose intended;**
  - (b) Kept clean and in good repair;**

**Findings:**

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

1. The toilets in the first, third, fourth, and fifth stalls in the girls' restroom contained a yellow substance around the chrome piece located behind the toilet seat; therefore, the toilets were not kept clean.
2. The toilet in the second stall of the girls' restroom contained a light brown build-up behind the chrome piece located behind the toilet seat; therefore, the toilet was not kept clean.
3. The toilet seat moved easily and was not tightly secured to the toilets in the first, second, third, fourth, and fifth stalls located in the girls' restroom; therefore, the toilets were not kept in good repair.
4. The toilets in the first and second stalls in the boys' restroom contained a yellow substance on both sides of the bottom base of the toilets; therefore, the toilets were not kept clean.
5. The toilet in the second stall in the boys' restroom contained a yellow substance around the chrome piece located behind the toilet seat; therefore, the toilet was not kept clean.
6. The toilet seat moved easily and was not tightly secured to the toilet in the second stall in the boys' restroom; therefore, the toilet was not kept in good repair.
7. Approximately four (4) urinals were covered with a plastic black bag in the boys' restroom. During interview, staff-in-charge stated that the custodian covered the urinals due to the urinals running constantly and a work order had been submitted. Therefore, the urinals were not kept in good repair.
8. A blue mat located on the wall in the Gym was cut out around and below an electrical outlet exposing wood below the electrical outlet; therefore, the mat was not kept in good repair. During interview, staff-in-charge stated that the condition of the mat had been reported to maintenance several times.

**Hygienic Practices**

**In Compliance**

**First Aid/Medication**

**In Compliance**

**Outdoor Play Area**

**In Compliance**

**Equipment**

**In Compliance**

**Transportation**

**In Compliance**

**Kitchen Requirements**

**In Compliance**

**Food Service**

**In Compliance**

**Meal Planning/Center Provides Meals**

**In Compliance**

**Meal Planning/Center Does Not Provide Meals**

**In Compliance**

**Children's Records**

**In Compliance**

**Written Documentation**

**Not In Compliance**

**1280 - 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, the surveyor found that a staff's (DOH: 09/28/12) file contained a professional development plan dated 12/02/20; therefore, the plan was not completed annually. During interview, staff-in-charge stated that the professional development plan was completed for the staff person; however, the documentation was not available for review.

Inspection Report

1305 - Fire Drills

Not In Compliance

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

(12) A fire drill shall be:

- (a) Conducted during hours of operation at least monthly; and
- (b) Documented.

(13) An earthquake drill, shelter-in-place or lockdown drill, and tornado drill shall be:

- (a) Conducted during hours of operation at least quarterly; and
- (b) Documented.

Findings:

General: Based on review of documentation, the surveyor found no documentation of a fire drill conducted during the month of April 2022. During interview, staff-in-charge stated that the fire drill was completed; however, she did not present documentation for review.

Posted Documentation

In Compliance

Animals

In Compliance

Signature of Provider/Representative

Title

Date