



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

Eric Friedlander
SECRETARY

Melissa A. Moore, Director
Division of Regulated Child Care
Southern Branch
116 Commerce Ave
London, KY 40744

Adam Mather
INSPECTOR GENERAL

Phone: (606) 330-2030 Fax: (606) 330-2056
<https://chfs.ky.gov/agencies/os/oig>

Inspection Report

Provider Name: ABC Child Care & Learning Center	Provider Information	CLR No: L356629
Provider Address: 205 Churchill Drive, Richmond, KY, 40475	Provider Type: LICENSED TYPE I	Capacity: 320
Owner(s): Et li, Inc.		Director(s): Berryman, Natalie

Inspection Type: Renewal Application	Inspection Information	Inspection No: 243345
Date Initiated: 02/22/2018 9:35 AM	Date Concluded: 02/22/2018 3:30 PM	
	No. of Children Present: 143	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	Not In Compliance
350 - Health, Safety, Comfort	Not In Compliance
922 KAR 2:090. Section 10. Director Requirements and Responsibilities. (1) A director shall: (l) Assure the health, safety, and comfort of each child;	
Findings: General: Based on observation and interview, the surveyor found a loose white electrical cord between the refrigerator and changing area in the Nursery One. The electrical cord was on the floor where it was accessible to children. Staff stated they were not sure what the electrical cord went to or how long it had been there.	
Employee Records	Not In Compliance
385 - 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 and interview, the surveyor was presented with a staff file (DOH: 5/22/17) that contained documentation of an out of state criminal records check for Tennessee being paid for on 5/30/17; however, there were no results for the out of state criminal records check on file. Upon interview, the Director was not aware that the results were missing from the file. The results of the criminal records check was not obtained within ninety (90) days of the staff's date of hire. The Director explained that the staff member works in a classroom the always requires two (2) staff so the staff member had not been left alone with the children.	

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 ½) 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. Staff file (DOH: 9/11/00) contained documentation of completing only fourteen and one half (14.5) hours of annual training for 9/11/16 - 9/10/17. Review of ECE-TRIS, confirmed that only fourteen and one half (14.5) hours were completed. The Director was aware of the training discrepancy.
2. Staff file (DOH: 4/18/16) contained documentation of completing only eleven (11) hours of annual training for 4/18/16 - 4/17/17. Review of ECE-TRIS, confirmed that only eleven (11) hours were completed. The Director was not aware of the training discrepancy.
3. Staff file (DOH: 11/23/15) contained documentation of completing only eight (8) hours of annual training for 11/23/16 - 11/22/17. Review of ECE-TRIS, confirmed that only eight (8) hours were completed. The Director was not aware of the training discrepancy.
4. Staff file (DOH: 4/2/02) contained documentation of completing only nine (9) hours of annual training for 4/2/16 - 4/1/17. Review of ECE-TRIS, confirmed that only nine (9) hours were completed. The Director was not aware of the training discrepancy.
5. Five (5) staff files (DOH: 12/19/16, 12/26/16, 2/27/17, 6/16/17, 2/20/17) contained documentation of six (6) hours of state required orientation not being completed in a timely manner within three (3) months of hire. Review of ECE-TRIS, confirmed that the orientation training was not completed timely. The Director reported she was not aware that the orientation was not completed timely.

Programming

In Compliance

Premises

Not In Compliance

645 - Sink

Not In Compliance

922 KAR 2:120. Section 10. Toilet, Diapering, and Toiletry Requirements.

(3) A sink shall be:

- (a) Located in or immediately adjacent to toilet rooms;**
- (b) Equipped with hot and cold running water that allows for hand washing;**
- (c) Equipped with hot water at a minimum temperature of ninety (90) degrees Fahrenheit and a maximum of 120 degrees Fahrenheit;**
- (d) Equipped with liquid soap;**
- (e) Equipped with hand-drying blower or single use disposable hand drying material;**
- (f) Equipped with an easily cleanable waste receptacle; and**
- (g) Immediately adjacent to a changing area used for infants and toddlers.**

Findings:

General: Based on observation and interview, the surveyor found that the water temperature in the boys' restroom off of the cafeteria was reading at one hundred forty-three (143) degrees Fahrenheit. Upon interview, staff stated that they have been having issues with the water temperature through out the facility either being too hot or not hot enough.

Hygienic Practices

Not In Compliance

685 - Diaper Changing Area/Surface

Not In Compliance

922 KAR 2:120. Section 10. Toilet, Diapering, and Toiletry Requirements.

(10) When a child is diapered, the child shall:

- (b) Be placed on a surface that is:**
 - 1. Clean;**
 - 2. Padded;**
 - 3. Free of holes, rips, tears, or other damage;**
 - 4. Nonabsorbent;**
 - 5. Easily cleaned; and**
 - 6. Free of any items not used for diaper changing.**

Findings:

General: Based on observation and interview, the surveyor found that the changing mat in the Rainbow Room had a dried brown substance on it. Staff interviewed stated that the diapering mat is cleaned and sanitized after each use.

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

In Compliance

Food Service/Food Program

In Compliance

Food Service

In Compliance

Children's Records

In Compliance

Written Documentation

In Compliance

Posted Documentation

In Compliance

Signature of Provider/Representative

Title

Date