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Andy Beshear GOVERNOR

Provider Name: Science Hill Head Start

CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

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Eric Friedlander SECRETARY

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Inspection Report

Provider Information

Provider Type: LICENSED TYPE I

Capacity: 20

Director(s): Wiles, Rachel

CLR No: 1352810

Provider Address: 349 West Highway 635, Science Hill, KY, 42553 Owner(s): Lake Cumberland Community Action Agency, Inc.

Inspection Information

Inspection No: 318682

Inspection Type: Renewal Application Date Initiated: 11/03/2021 9:00 AM

Date Concluded: 11/03/2021 12:00 PM

No. of Children Present: 11

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, the surveyor found that a staff's (DOH: 06/07/21) 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; therefore, the staff person was hired prior to clearance for employment. The surveyor did not observe the staff person working alone with children. During interview, staff-in-charge stated that she has not worked alone with children and that there are always two (2) staff persons inside a classroom. Staff-in-charge stated that she has not received an email confirmation yet to schedule an appointment for fingerprints. Staff-in-charge stated that Central Office completes the background checks. The staff's file contained a completed Child Abuse/Neglect Background Check dated 05/24/21 and a completed Criminal Records Background Check dated 05/25/21.

Supervision

In Compliance

Staffing Requirements

In Compliance



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 observation, the surveyor found the following:

- 1. A red dolly placed in front of a brown cabinet located near the restrooms. The surveyor observed children to walk past the red dolly to go to the restroom.
- 2. Several cords dangling from a printer and phones located on a countertop in the kitchen. The surveyor observed children eating lunch at a lunch table inside the kitchen placed near the cords
- 3. A box of Assure Soap that stated "Keep Out of the Reach of Children" on the back label placed on a shelf underneath a counter in the kitchen with a blue curtain observed to be hanging over the shelf. A lunch table used by the children was placed near the counter and the soap was observed to be within reach of the children.
- 4. A large brown box placed on a rolling cart inside a room located next to the Head Start Classroom. The large box was observed to be placed in the pathway that leads to an exit door that goes to the playground and appeared to not be secure and had a chair placed in front of it. During interview, staff-in-charge stated that children do walk through the room to the exit door that leads to the playground; however, the children and staff have been using the front door to exit to the playground since the box has been placed inside the room.
- 5. A large brown box propped against a counter and a large round table propped against a wall behind another table inside a room located next to the Head Start Classroom. During interview, staff-in-charge stated that children do walk through the room to the exit door that leads to the playground; however, the children and staff have been using the front door to exit to the playground.

Director Requirements

Not In Compliance

Not In Compliance

360 - Staff Evaluation

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: 07/30/08) file contained an annual written performance evaluation dated 09/25/20; therefore, the evaluation was not completed annually. Through interview with staff-in-charge, the surveyor learned that an up-to-date annual written performance evaluation was completed for the staff person; however, the evaluation has not been sent to the child-care center from Central Office.

Employee Records

Not In Compliance

435 - Training

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 documentation and ECE-TRIS, the surveyor found that a staff (DOH: 12/12/17) completed one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training on 10/06/16; therefore, the training was not completed within the last five (5) years.

Programming

In Compliance

Premises

Not In Compliance
Not In Compliance

585 - Premises Requirements

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. An oval square rug placed next to the kitchen area that contained dark stains; therefore, the rug was not kept clean.
- 2. A blue square rug placed next to a small book shelf in the Head Start Classroom that contained a brown stain; therefore, the rug was not kept clean.



Inspection Report

695 - Toilet Not In Compliance

922 KAR 2:120. Section 12. Toilet, Diapering, and Toiletry Requirements.

- (4) Each toilet shall:
- (a) Be kept in clean condition;
- (b) Be kept in good repair;
- (c) Be in a lighted room; and
- (d) Have ventilation to outside air.

Findings:

General: Based on observation, the surveyor found that the toilet seat moved easily and was not tightly secured to the toilet in the boys' restroom; therefore, the toilet was not kept in good repair.

Hygienic Practices

In Compliance

First Aid/Medication

In Compliance

Outdoor Play Area

Not In Compliance
Not In Compliance

795 - Playground Conditions

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

- (20) An outdoor play area shall be:
- (d) Safe from foreseeable hazard;
- (e) Well drained;
- (f) Well maintained;
- (g) In good repair; and
- (h) Visible to staff at all times.

Findings

General: Based on observation, the surveyor found two (2) silver bolts protruding from the ground on a large black rubber mat used for tricycles on the playground. The bolts were observed to be easily pulled out of the ground.

Equipment

Transportation

Kitchen Requirements

In Compliance

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
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 a staff's (DOH: 12/12/17) file contained a professional development plan dated for 09/25/20; therefore, the plan was not completed annually.

Through interview with staff-in-charge, the surveyor learned that the annual professional development plan for the staff mentioned has been completed; however, the plan has not been sent to the child-care center from Central Office.

Posted Documentation

In Compliance

Animals

In Compliance



Title