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Inspection Report

Provider Name: Treasure House Child Development Center	Provider Information Provider Type: LICENSED TYPE I	CLR No: L353849
Provider Address: 203 West River Center Blvd., Covington, KY, 41011		Capacity: 188
Owner(s): Children, Inc.		Director(s): Rodriguez, Julie

Inspection Type: Renewal Application	Inspection Information	Inspection No: 290805
Date Initiated: 10/25/2019 10:00 AM	Date Concluded: 10/25/2019 11:11 AM	
	No. of Children Present: 81	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	Not In Compliance
180 - Plan of Correction/15 days	Not In Compliance
922 KAR 2:090. Section 14. Statement of Deficiency and Corrective Action Plans. (2) Except for a violation posing an immediate threat as handled in accordance with KRS 199.896(5)(c), a child-care center shall submit a written corrective action plan to the cabinet or its designee within fifteen (15) calendar days of the date of the statement of deficiency to eliminate or correct the regulatory violation.	
Findings:	
A PLAN OF CORRECTION WAS DUE ON 11/13/2019 AND AS OF 11/19/2019, THE PLAN OF CORRECTION HAS NOT BEEN RECEIVED.	
Director Requirements	In Compliance
Employee Records	Not In Compliance
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, it was found that one staff member did not completed Pediatric Abusive Head Trauma training within the required timeframe. The date of hire for this staff member is 10/15/2018. A review of ECE-TRIS confirmed these findings.	
Programming	In Compliance

Inspection Report

Premises

Not In Compliance

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, this regulatory requirement was not met. During a tour of the facility, the surveyor observed long cracks in the floor tiles in three separate rooms (Room #123, Room #126 and the cafeteria). These cracks were approximately seven - twelve inches long.

Hygienic Practices

In Compliance

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

Not Applicable

Food Service/Food Program

In Compliance

Food Service

In Compliance

Children's Records

In Compliance

Written Documentation

In Compliance

Posted Documentation

In Compliance

Animals

In Compliance

Signature of Provider/Representative

Title

Date