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Inspection Report

Provider Name: Somerset Christian School	Provider Information	CLR No: L358058
Provider Address: 815 Grand Central Blvd, Somerset, KY, 42503	Provider Type: LICENSED TYPE I	Capacity: 124
Owner(s): Somerset Christian School, Inc.		Director(s): Taylor, Darla Melody

Inspection Type: Renewal Application	Inspection Information	Inspection No: 319109
Date Initiated: 02/01/2022 1:12 PM	Date Concluded: 02/01/2022 3:57 PM	
	No. of Children Present:	

Inspection Report		
Background Checks		Not In Compliance
5 - Background check/left alone/dismissed/relocated		Not In Compliance
<p>922 KAR 2:280. Section 3. Implementation and Enforcement.</p> <p>(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.</p> <p>(2) A child care staff member hired on or after April 1, 2018, shall:</p> <p>(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</p> <p>(b) 1. Have submitted to the background checks required in accordance with this administrative regulation;</p> <p>2. Not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative regulation; and</p> <p>3. Be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.</p>		
Findings:		
General: Based on review of documentation, the surveyor found the following:		
<p>1. A staff's (DOH: 08/01/21) 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. During interview, staff-in-charge confirmed that a background check was not submitted through the Kentucky National Background Check Service and that she was unaware that she needed to submit a background check through the Kentucky National Background Check Service. The staff's file contained a completed Child Abuse/Neglect Background Check dated 08/31/21 and a completed Criminal Records Background Check dated 08/24/21.</p> <p>2. A staff's (DOH: 08/01/21) 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. During interview, staff-in-charge confirmed that a background check was not submitted through the Kentucky National Background Check Service and that she was unaware that she needed to submit a background check through the Kentucky National Background Check Service. The staff's file contained a completed Child Abuse/Neglect Background Check dated 09/01/21 and a completed Criminal Records Background Check dated 04/23/21.</p>		
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. Two (2) cans of Lysol Wipes, located on a shelf in the children's restroom in Classroom A2, that stated "Keep Out of Reach of Children," on the back label. The wipes were observed to be accessible and within reach of the children.
2. A bottle of Equate Soap, located on the sink in Classroom A4, that stated, "Keep Out of Reach of Children," on the back label. The soap was observed to be accessible and within reach of the children.
3. A bottle of Equate Soap, located on the sink in Classroom A5, that stated, "Keep Out of Reach of Children," on the back label. The soap was observed to be accessible and within reach of the children.
4. One (1) bottle of Dial Soap and One (1) bottle of Equate Hand Sanitizer, located on the sink in Classroom A6, that states, "Keep Out of Reach of Children," on the back label. The soap and the hand sanitizer were observed to be accessible and within reach of the children.
5. Two (2) outlet covers missing from an outlet, located beside the white board in Classroom A5 and One (1) outlet cover missing from an outlet, located behind a vacuum in Classroom A6.

During interview, staff-in-charge stated that Classrooms A5 and A6 are not currently being used for their licensed preschool, but that the school is currently using those rooms for their Kindergarten classes, with children ages 5-6 attending.

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: Bases on review of documentation, the surveyor found the following:

1. A staff's (DOH: 08/01/06) file contained an annual written performance evaluation dated for 03/23/16; therefore, the evaluation was not completed annually.
2. A staff's (DOH: 08/26/05) file contained an annual written performance evaluation dated for 03/07/08; therefore, the evaluation was not completed annually.
3. A staff's (DOH: 08/14/16) file did not contain a written performance evaluation; therefore, the surveyor was unable to determine that the evaluation was completed annually.
4. A staff's (DOH: 08/01/19) file did not contain a written performance evaluation; therefore, the surveyor was unable to determine that the evaluation was completed annually.
5. A staff's (DOH: 08/01/19) file did not contain a written performance evaluation; therefore, the surveyor was unable to determine that the evaluation was completed annually.
6. A staff's (DOH: 01/23/19) file did not contain a written performance evaluation; therefore, the surveyor was unable to determine that the evaluation was completed annually.
7. A staff's (DOH: 008/01/10) file contained an annual written performance evaluation that did not contain the year it was completed; therefore, the surveyor was unable to determine that the evaluation was completed annually.

During interview, staff-in-charge stated that the annual evaluations were completed for the staff mentioned; however, she was unable to locate the documentation.

Employee Records**Not In Compliance****405 - 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, the surveyor found the following:

1. A staff's (DOH: 03/03/21) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis.
2. A staff's (DOH: 08/01/21) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis.

410 - CPR/First Aid Coverage

Not In Compliance

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

(3) For a child-care center licensed for infant, toddler, or preschool-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills:

- (a) Infant and child cardiopulmonary resuscitation; and**
- (b) Infant and child first aid.**

(4) For a child-care center licensed for school-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills:

- (a) Adult cardiopulmonary resuscitation; and**
- (b) First aid.**

(5) Cardiopulmonary resuscitation (CPR) and first aid training shall be in addition to the fifteen (15) clock hours requirement in subsection (16) of this section.

Findings:

General: Based on review of documentation presented, the surveyor found that zero (0) of the center's staff possessed current certification in CPR/First Aid. During interview, staff stated she was aware of this and staff have been scheduled for this training.

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. Staff (DOH: 08/01/19) obtained zero (0) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/20 – 06/30/21.
2. Two (2) staff (DOH: 08/14/16 and 08/01/19) obtained only twelve (12) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/20 – 06/30/21.
3. Staff (DOH: 08/01/21) did not complete the six (6) hours of cabinet approved orientation; therefore, the training was not completed within the first three (3) months of employment as required.

Programming

In Compliance

Inspection Report**Premises****Not In Compliance****690 - Sink****Not In Compliance****922 KAR 2:120. Section 12. 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, the surveyor found the following:

1. The hot water temperature at the sink in Classroom A1 measured approximately 80 degrees Fahrenheit.
2. The hot water temperature at the sink in the restroom of Classroom A1 measured approximately 80 degrees Fahrenheit.
3. The hot water temperature at the sink in Classroom A2 measured approximately 80 degrees Fahrenheit.
4. The hot water temperature at the sink in the restroom of Classroom A2 measured approximately 80 degrees Fahrenheit.
5. The hot water temperature in Classroom A3 measured approximately 75 degrees Fahrenheit.
6. The hot water temperature in Classroom A4 measured approximately 80 degrees Fahrenheit.
7. The hot water temperature in Classroom A5 measured approximately 80 degrees Fahrenheit.
8. The hot water temperature in Classroom A6 measured approximately 80 degrees Fahrenheit.
9. The hot water temperature for three (3) sinks in the boy's restroom measured approximately 60 degrees Fahrenheit.
10. The hot water temperature for three (3) sinks in the girl's restroom measured approximately 60 degrees Fahrenheit.

Therefore, the hot water was not a minimum temperature of ninety (90) degrees Fahrenheit and a maximum of 120 degrees Fahrenheit.

During interview, staff-in-charge stated that they had the water temperature turned down throughout the whole building and she would talk with the janitor on having the water temperature turned back up.

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 the following:

1. The toilet seat moved easily and was not tightly secured to the toilet in the restroom located in the A2 Classroom.
2. There was a yellow substance, that appeared to be dried urine, located under the toilet seat lid located in the restroom of the A1 Classroom; therefore, the toilet was not kept in clean condition.
3. There was a yellow substance, that appeared to be dried urine, located under the toilet seat lid located in the restroom of the A2 Classroom; therefore, the toilet was not kept in clean condition.
4. There was a yellow substance, that appeared to be dried urine, located under the toilet seat lid in stall #1 and #2 of the boys' restroom; therefore, the toilet was not kept in clean condition.
5. There were two (2) toilet seats located in the girls' restroom, stall #2 and #4, that contained a yellow substance that appeared to be dried urine; therefore, the toilet seats were not kept in clean condition.
6. The toilets located in stalls #5 and #6 had not been flushed; therefore, the toilets were not kept in clean condition.

During interview, the staff-in-charge stated that the restrooms were also used by all the elementary students located in the school. She stated that when the licensed preschool uses the restrooms, no one else in the building was allowed to be in the restroom with them.

Hygienic Practices**In Compliance****First Aid/Medication****In Compliance****Outdoor Play Area****In Compliance****Equipment****In Compliance****Transportation****In Compliance**

Inspection Report	
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	Not In Compliance
1250 - Enrollment Information	Not In Compliance
922 KAR 2:090. Section 9. Records. (1) A child-care center shall maintain: (b) A written record for each child: 1. Completed and signed by the child's parent; 2. Retained on file on the first day the child attends the child-care center; and 3. To contain: a. Identifying information about the child, which includes, at a minimum, the child's name, address, and date of birth; b. Contact information to enable a person in charge to contact the child's: (i) Parent at the parent's home or place of employment; (ii) Family physician; and (iii) Preferred hospital; c. The name of each person who is designated in writing to pick-up the child; d. The child's general health status and medical history including, if applicable: (i) Allergies; (ii) Restriction on the child's participation in activities with specific instructions from the child's parent or health professional; and (iii) Permission from the parent for third-party professional services in the child-care center; e. The name and phone number of each person to be contacted in an emergency involving or impacting the child; f. Authorization by the parent for the child-care center to seek emergency medical care for the child in the parent's absence;	
Findings: General: Based on review of documentation, the surveyor found the following: 1. A child's (DOE: 09/01/21) file did not contain the name of the child's preferred hospital or contact telephone number. 2. A child's (DOE: 08/24/21) file did not contain the name of the child's preferred hospital or contact telephone number. 3. A child's (DOE: 08/20/21) file did not contain the name or contact telephone numbers for the child's preferred family physician or hospital. 4. A child's (DOE: 11/28/20) file did not contain the name of the child's preferred hospital or contact telephone number. 5. A child's (DOE: 07/01/21) file did not contain the name or contact telephone numbers for the child's preferred family physician or hospital. 6. A child's (DOE: 04/19/21) file did not contain the name of the child's preferred hospital or contact telephone number.	
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 the following: 1. A staff's (DOH: 08/01/06) file contained a professional development plan dated for 03/23/16; therefore, the surveyor was unable to determine that the plan was completed annually. 2. A staff's (DOH: 08/01/10) file contained a professional development plan dated for 12/15/15; therefore, the surveyor was unable to determine that the plan was completed annually. 3. A staff's (DOH: 08/21/05) file contained a professional development plan dated for 10/23/20; therefore, the surveyor was unable to determine that the plan was completed annually. 4. A staff's (DOH: 08/14/16) file did not contain a professional development plan; therefore, the surveyor was unable to determine that the plan was completed annually. 5. A staff's (DOH: 08/01/19) file did not contain a professional development plan; therefore, the surveyor was unable to determine that the plan was completed annually. During interview, staff-in-charge stated that the annual professional development plans were completed for the staff mentioned; however, she was unable to locate the documentation at the time of inspection.	
Posted Documentation	In Compliance
Animals	In Compliance

Signature of Provider/Representative

Title

Date