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Andy Beshear GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

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Eric Friedlander SECRETARY

Adam Mather INSPECTOR GENERAL

Inspection Report

Provider Information

Provider Type: LICENSED TYPE I

Capacity: 25

CLR No: 1354268

Provider Address: 653 Old Zula Road, Monticello, KY, 42633

Director(s): Ragan, Betty Jean

Owner(s): Ragan, Betty Jean

Provider Name: Betty's Day Care

Inspection Information

Inspection No: 307843

Inspection Type: Renewal Application Date Initiated: 06/24/2021 2:10 PM

Date Concluded: 06/24/2021 3:17 PM

No. of Children Present: 3

Inspection Report

Background Checks

In Compliance In Compliance

Supervision

In Compliance

Staffing Requirements General Administration

In Compliance **Not In Compliance**

Director Requirements

Not In Compliance

922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

(1) A director shall:

345 - Staff Evaluation

(j) Assess each staff person's interaction with children in care and classroom performance through an annual written performance evaluation;

395 - TB Verification

General: Based on review of documentation, the personnel files presented to the surveyor did not contain annual written performance evaluations. During interview, staff-in-charge stated that she had been working on the current evaluations but was unsure where she had placed the previous evaluations since they were not in the employee files; therefore, the child-care center did not provide verification that the evaluations were completed annually.

Employee Records

Not In Compliance 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the surveyor found staff's (DOH: 06/04/1990, DOH: 06/07/1989, DOH: 06/07/1999) negative tuberculin result was no longer current as of 06/17/2021; therefore, the child-care center failed to show proof that the employees are free of active tuberculosis or provide a copy of a negative tuberculin result.

Programming

In Compliance

Premises

In Compliance

Hygienic Practices

In Compliance

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance



Inspection Report

Equipment

In Compliance

Transportation

In Compliance
In Compliance

Food Service/Food Program

Food Service In Compliance

Children's Records

Not In Compliance
Not In Compliance

1135 - Immunization

- 922 KAR 2:090. Section 9. Records.
 (1) A child-care center shall maintain:
- (a) A current immunization certificate for each child in care within thirty (30) days of the child's enrollment, unless an attending physician or the child's parent objects to the immunization of the child pursuant to KRS 214.036;

Findings:

General: Based on review of documentation, the surveyor found a child's (DOE: 08/13/2019) immunization certificate was no longer current as of 10/01/2020; therefore, the child-care center failed to maintain a current immunization certificate for the child.

Written Documentation

Not In Compliance

Not In Compliance

1170 - Professional Development

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 personnel files presented to the surveyor did not contain an annual written professional development plan. During interview, staff-in-charge stated that she had been working on printing and updating the professional development plans for staff, but was unsure where she had placed the professional development plans from the previous year; therefore, the child-care center did not provide verification that the professional development plans were completed annually.

Posted Documentation

In Compliance

Animals

In Compliance

Title Date

An Equal Opportunity Employer M/F/D

Signature of Provider/Representative