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GOVERNOR

**CABINET FOR HEALTH AND FAMILY SERVICES**  
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**Adam Mather**  
INSPECTOR GENERAL

**Inspection Report**

<b>Provider Name:</b> Reidland United Methodist Church Preschool	<b>Provider Information</b> <b>Provider Type:</b> LICENSED TYPE I	<b>CLR No:</b> L354331
<b>Provider Address:</b> 5515 Reidland Road, Paducah, KY, 42003		<b>Capacity:</b> 90
<b>Owner(s):</b> Reidland United Methodist Church		<b>Director(s):</b> Etheridge, Christina Joy

<b>Inspection Type:</b> Renewal Application	<b>Inspection Information</b>	<b>Inspection No:</b> 318373
<b>Date Initiated:</b> 09/20/2021 9:30 AM	<b>Date Concluded:</b> 09/20/2021 11:15 AM	
	<b>No. of Children Present:</b> 13	

Inspection Report	
<b>Background Checks</b>	<b>In Compliance</b>
<b>Supervision</b>	<b>In Compliance</b>
<b>Staffing Requirements</b>	<b>In Compliance</b>
<b>General Administration</b>	<b>In Compliance</b>
<b>Director Requirements</b>	<b>In Compliance</b>
<b>Employee Records</b>	<b>Not In Compliance</b>

**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, a caregiver hired 07/27/2020, had TB documentation on file that was dated 06/14/19. A caregiver hired 07/13/15, had TB documentation on file that was dated 08/08/19.

<b>Programming</b>	<b>In Compliance</b>
<b>Premises</b>	<b>In Compliance</b>
<b>Hygienic Practices</b>	<b>In Compliance</b>
<b>First Aid/Medication</b>	<b>In Compliance</b>
<b>Outdoor Play Area</b>	<b>In Compliance</b>
<b>Equipment</b>	<b>In Compliance</b>
<b>Transportation</b>	<b>Not Applicable</b>

**Inspection Report**

**Kitchen Requirements**

**Not In Compliance**

**1045 - Frozen Food**

**Not In Compliance**

**922 KAR 2:120. Section 8. Kitchen Requirements.**

**(5) Frozen food shall be:**

**(a) Kept at a temperature of zero degrees Fahrenheit or below; and**

**(b) Thawed:**

**1. At refrigerator temperatures;**

**2. Under cool, potable running water;**

**3. As part of the cooking process; or**

**4. By another method in accordance with the Department for Public Health's food safety standards and permits, established in KRS Chapter 217.**

**Findings:**

General: Based on observation, a thermometer or temperature indicating device was not present in the freezer used by the children in the food prep area.

**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**

**1245 - Immunization**

**Not In Compliance**

**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, a child first date of attendance on 08/16/21, did not have an immunization certificate on file.

**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, ten (10) children, enrolled on 08/16/21, each did not have information on file for staff to contact the child's physician.

**Written Documentation**

**In Compliance**

**Posted Documentation**

**In Compliance**

**Animals**

**In Compliance**

Signature of Provider/Representative

Title

Date