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GOVERNOR

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Adam Mather
INSPECTOR GENERAL

Inspection Report

Provider Name: Cornerstone to Learning Inc.	Provider Information	CLR No: L358979
Provider Address: 222 North Depot Street, Lebanon, KY, 40033	Provider Type: LICENSED TYPE I	Capacity: 183
Owner(s): Cornerstone To Learning Inc.		Director(s): Mills, Joseph "Chris"

Inspection Type: Renewal Application	Inspection Information	Inspection No: 218462
Date Initiated: 01/26/2017 10:33 AM	Date Concluded: 01/26/2017 2:50 PM	
	No. of Children Present: 102	

Inspection Report	
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	Not In Compliance
255 - Staff Meeting	Not In Compliance
922 KAR 2:110. Section 4. Director Requirements and Responsibilities. (1) Effective with the adoption of this administrative regulation, a director shall: (i) Conduct, manage, and document in writing staff meetings;	
Findings: General: Based on review of documentation and interview, the surveyor found that there were no staff meetings documented for 2016. Upon interview, the Director reported that staff meetings are conducted regularly; however, he has not typed them up.	
260 - Staff Evaluation	Not In Compliance
922 KAR 2:110. Section 4. Director Requirements and Responsibilities. (1) Effective with the adoption of this administrative regulation, 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 and interview, the surveyor found that ten (10) employee files (DOH: 10/12/09, 7/6/15, 6/8/15, 9/30/15, 9/30/91, 5/15/10, 2/26/14, 12/6/04, 8/15/00, 10/14/96) presented for review did not contain an annual evaluation. The Director stated that he had not yet completed the employee evaluations.	
265 - Health, Safety, Comfort	Not In Compliance
922 KAR 2:110. Section 4. Director Requirements and Responsibilities. (1) Effective with the adoption of this administrative regulation, a director shall: (l) Provide for the health, safety, and comfort of each child;	
Findings: General: Based on observation and interview, the surveyor found a large floor fan sitting on top of a shelf in the Younger Two's Classroom. The fan was not secured to the shelf and the fan and cord were accessible to the children. Upon interview, the Director acknowledged that the fan posed a safety risk to the children.	

285 - Parental/Family Involvement Activity

Not In Compliance

922 KAR 2:110. Section 4. Director Requirements and Responsibilities.

(1) Effective with the adoption of this administrative regulation, a director shall:

(p) Coordinate at least one (1) annual activity involving parental or family participation.

Findings:

General: Based on review of documentation and interview, the surveyor found that there were no documented parent/family involvement activities. The Director stated that parent/family involvement activities had been conducted; however, they were not documented.

Employee Records

Not In Compliance

300 - Background checks/left alone

Not In Compliance

922 KAR 2:090. Section 6. License Issuance.

(5) An individual described in subsection (4) of this section shall:

(a) Submit to background checks described in paragraph (b) of this subsection;

(b) May be employed or work with a child on a probationary basis for up to ninety (90) calendar days, pending completion of a:

1. Child abuse or neglect check using the central registry in accordance with 922 KAR 1:470;

2. Criminal records check required by KRS 199.896(19);

3. Criminal records check for any previous state of residence if the person resided outside the state of Kentucky in the last five (5) years; and

4. An address check of the Sex Offender Registry; and

(c) Not be left alone in the presence of a child until copies of the background checks in accordance with paragraph (b) of this subsection have been received by the licensee.

Findings:

General: Based on review of documentation and interview, the following were found:

1. A criminal record check was submitted on 12/14/16 for an employee (DOH: 12/7/16); therefore, the criminal record check was not submitted on or before the date of hire as required.
2. A criminal record check was submitted on 1/13/17 for an employee (DOH: 1/9/17); therefore, the criminal record check was not submitted on or before the date of hire as required.
3. A criminal record check was submitted on 9/13/16 for an employee (DOH: 9/6/16); therefore, the criminal record check was not submitted on or before the date of hire as required.
4. A criminal record check was submitted on 9/9/16 for an employee (DOH: 8/16/16); therefore, the criminal record check was not submitted on or before the date of hire as required.
5. A criminal record check was submitted on 10/7/16 for an employee (DOH: 10/4/16); therefore, the criminal record check was not submitted on or before the date of hire as required.
6. A criminal record check was submitted on 9/30/16 for an employee (DOH: 9/6/16); therefore, the criminal record check was not submitted on or before the date of hire as required.
7. A child abuse and neglect background check was submitted on 10/24/16 for an employee (DOH: 9/6/16); therefore, the background check was not submitted within five (5) business days of the date of hire as required.
8. One (1) employee file (DOH: 10/26/16) presented for review did not contain results for a criminal records check or documentation showing that the criminal records check had been submitted.

Upon interview, the Director reported that he was not aware of the time frame requirements for the submission of the criminal records check. He stated that none of the employees worked alone with the children prior to receiving the background check results. The Director did not present documentation to verify that the missing criminal records check had been submitted.

310 - Personnel File

Not In Compliance

922 KAR 2:110. Section 3. Records.

(1) A child-care center shall maintain:

(e) A current personnel file for each child-care center staff person to include:

- 1. Name, address, date of birth, and date of employment;**
- 2. Proof of educational qualifications;**
- 3. Record of annual performance evaluation;**
- 4. Written record of training participation to include:**
 - a. The training source;**
 - b. Location;**
 - c. Date; and**
 - d. Number of clock hours completed;**
- 5. Every two (2) years, a:**
 - a. Statement from a health professional that the individual is free of active tuberculosis; or**
 - b. Copy of negative tuberculin results; and**
- 6. For a director, employee, volunteer, or any person with supervisory or disciplinary control over, or having unsupervised contact with, a child in care, the results of a:**
 - a. Child abuse or neglect check using the central registry in accordance with 922 KAR 1:470;**
 - b. Criminal records check required by KRS 199.896(19);**
 - c. Criminal records check from any previous state of residence completed once if:**
 - (i) The individual resided outside the state of Kentucky in the last five (5) years; and**
 - (ii) No criminal records check has been completed for the individual's previous state of residence; and**
 - d. An address check of the Sex Offender Registry;**

Findings:

General: Based on review of documentation, review of ECE-TRIS, and interview, the following were found:

1. Seven (7) employee files (DOH: 1/9/17, 5/26/16, 9/6/16, 10/24/16, 10/4/16, 9/6/16, 4/4/16) presented for review did not contain proof of education in the form of a High School Diploma, GED, or proof of enrollment in secondary education. The Director reported he did have proof of education for one employee (DOH: 1/9/17) as she was re-hired. He explained the documentation of education would be in her old file; however, he noted the documentation would not be easily located.
2. Ten (10) employee files (DOH: 10/12/09, 7/6/15, 6/8/15, 9/30/15, 9/30/91, 5/15/10, 2/26/14, 12/6/04, 8/15/00, 10/14/96) presented for review did not contain an annual evaluation. The Director stated that he had not yet completed the employee evaluations.
3. Seven (7) employee files (DOH: 5/26/16, 8/6/16, 9/30/91, 10/20/03, 12/6/04, 8/15/00, 5/15/10) did not contain a statement from a health professional completed within the past two (2) years, stating that the individual is free of active tuberculosis or negative tuberculin test results.
4. One (1) employee file (DOH: 10/26/16) presented for review did not contain results for a criminal records check or documentation showing that the criminal records check had been submitted. The Director was not able to verify that the missing criminal records check had been submitted.

315 - Educational Requirements

Not In Compliance

922 KAR 2:110. Section 5. Staff Requirements.

(1) Child-care center staff:

(a) Hired after January 1, 2009, who have supervisory power over a minor and are not enrolled in secondary education, shall have a:

- 1. High school diploma;**
- 2. GED or qualifying documentation from a comparable educational entity; or**
- 3. Commonwealth Child Care Credential as described in 922 KAR 2:250;**

Findings:

General: Based on review of documentation and interview, the surveyor found that seven (7) employee files (DOH: 1/9/17, 5/26/16, 9/6/16, 10/24/16, 10/4/16, 9/6/16, 4/4/16) presented for review did not contain verification of education in the form of a High School Diploma, GED, or proof of enrollment in secondary education. The director reported he did have proof of education for one employee (DOH: 1/9/17) as she was rehired. He explained the documentation of education would be in her old file; however, he noted he would not be easily located.

320 - TB Verification

Not In Compliance

922 KAR 2:110. Section 5. 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 and interview, the following were found:

1. There were two (2) employee files (DOH: 5/26/16 & 8/6/16) which did not contain a copy of a negative tuberculin result or a statement from a health professional that the individual is free of active tuberculosis.
2. There were five (5) employee files (DOH: 9/30/91, 10/20/03, 12/6/04, 8/15/00, 5/15/10) which contained negative tuberculin test results that were no longer current as they had not been administered or interpreted within the past two (2) years.

330 - Adequate Substitute(s)**Not In Compliance****922 KAR 2:110. Section 5. Staff Requirements.****(6) Child-care centers shall have available in case of need:**

- (a) One (1) qualified substitute staff person for a Type II child-care center; or**
- (b) Two (2) qualified substitute staff persons for a Type I child-care center.**

Findings:

General: Based on review of documentation and interview, the surveyor found that the Type I child care center does not have two (2) qualified substitute staff persons available in the case of need. Upon interview, the Director reported that the center does not have substitutes that are called in when needed as the owner or himself have dual roles as substitutes. One substitute file (DOH: 9/30/91) did not contain tuberculin test results or a statement from a medical professional stating the substitute was clear of active tuberculosis completed within the past two (2) years, documentation of annual training, annual professional development plan, or annual evaluation. The second substitute file (DOH: 10/20/03) did not contain tuberculin test results or a statement from a medical professional stating the substitute was clear of active tuberculosis completed within the past two (2) years, documentation of annual training, or an annual professional development plan.

335 - Qualified Substitute**Not In Compliance****922 KAR 2:110. Section 5. Staff Requirements.****(7) Each qualified substitute staff person shall:**

- (a) Meet the staff requirements of this administrative regulation; and**
- (b) Provide the required documentation to verify compliance with this administrative regulation.**

Findings:

General: Based on review of documentation and interview, the surveyor found that the Type I child care center does not have two (2) qualified substitute staff persons available in the case of need. Upon interview, the Director reported that the center does not have substitutes that are called in when needed as the owner or himself have dual roles as substitutes. One substitute file (DOH: 9/30/91) did not contain tuberculin test results or a statement from a medical professional stating the substitute was clear of active tuberculosis completed within the past two (2) years, documentation of annual training, annual professional development plan, or annual evaluation. The second (2nd) substitute file (DOH: 10/20/03) did not contain tuberculin test results or a statement from a medical professional stating the substitute was clear of active tuberculosis completed within the past two (2) years, documentation of annual training, or an annual professional development plan.

340 - Training**Not In Compliance****922 KAR 2:110. Section 5. Staff Requirements.****(14) 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 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 pediatric abusive head trauma training completed once every five (5) years.**

Findings:

General: Based on review of documentation, review of ECE-TRIS, and interview, the following were found:

1. One (1) employee file (DOH: 6/8/15) contained documentation of state required orientation having been completed on 9/12/15, which was not within the required time frame.
2. Seven (7) employee files (DOH: 5/26/16, 9/6/16, 8/16/16, 10/24/16, 10/4/16, 9/6/16, 10/26/16) did not contain documentation of having completed the state required six (6) hours of orientation. Review of ECE-TRIS revealed that the employees had not yet completed the orientation.
3. Ten (10) employee files (DOH: 10/12/09, 7/6/15, 6/8/15, 9/30/15, 9/30/91, 10/20/03, 12/6/04, 8/15/00, 5/15/10, 2/26/14) presented for review did not contain documentation of the employee's completion of fifteen (15) hours of annual state required training. Review of ECE-TRIS revealed that the employees had failed to complete the required annual training.
4. Four (4) employee files (DOH: 7/6/15, 6/8/15, 9/30/15, 12/6/04) presented for review did not contain documentation of having completed Pediatric Abusive Head Trauma training within the required time frame. Review of ECE-TRIS revealed that the training was not completed.

Upon interview, the Director stated that all staff are scheduled to attend orientation but they have not yet completed it. The Director was not aware of the discrepancies in relation to annual training requirements not being met.

350 - Program of Activities Followed

Not In Compliance

922 KAR 2:120. Section 2. Child Care Services.**(4) The child-care center shall provide a daily planned program:**

- (a) Posted in writing in a conspicuous location with each age group and followed;**
- (b) Of activities that are individualized and developmentally appropriate for each child served;**
- (c) That provides experience to promote the individual child's physical, emotional, social, and intellectual growth and well-being; and**
- (d) That offers a variety of creative activities including the following:**
 - 1. Art;**
 - 2. Music;**
 - 3. Dramatic play;**
 - 4. Stories and books;**
 - 5. Science;**
 - 6. Block building;**
 - 7. Tactile activity;**
 - 8. Culture;**
 - 9. Indoor or outdoor play in which a child makes use of both small and large muscles;**
 - 10. A balance of active and quiet play, including group and individual activity;**
 - 11. An opportunity for a child to:**
 - a. Have some free choice of activities;**
 - b. If desired, play apart from the group at times;**

Findings:

General: Based on observation and interview, the surveyor found that a lesson plan was not posted in the School-Age Classroom. Staff reported that children are not in the classroom until after school gets out. Staff could not locate a lesson plan.

460 - Inaccessible Items

Not In Compliance

922 KAR 2:120. Section 3. General Requirements.**(7) Except in accordance with subsection (8) of this section, the following shall be inaccessible to a child in care:**

- (a) Toxic cleaning supplies, poisons, and insecticides;**
- (b) Knives and sharp objects;**
- (c) Matches, cigarettes, lighters, and flammable liquids;**
- (d) Plastic bags;**
- (e) Litter and rubbish;**
- (f) Bar soap; and**
- (g) Personal belongings and medications of staff.**

Findings:

General: Based on observation and interview, the following was found:

- 1. There was a broom and dust pan located by the sink in the Older Three's Classroom which were accessible to the children.
- 2. There was a soiled sponge laying on the hand washing sink in the Older Three's Classroom which was accessible to the children. Staff confirmed that it was a cleaning sponge.
- 3. The storage room located off of the Younger Three's Classroom was not locked. Staff reported they had blocked the door way with the toy wood kitchen and Little Tikes baby doll bed, both items were able to be scooted around on the tile floor with minimal force. There was a toilet brush on the floor inside the storage room door that was be accessible to children.
- 4. There was a large McDonald's drink cup on the table next to the changing area in the Younger Two's Classroom which was accessible to the children. The surveyor was able to confirm that the drink belonged to staff through interview.

520 - 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 and interview, the following were found:

- 1. There was a large water stain on a ceiling tile located in the front corner of the School-Age Classroom. Upon interview, the Director reported he was aware that the center had a water leak but he thought it had been repaired.
- 2. There were two (2) ceiling tiles missing in the School-Age Classroom. The Director was not aware of the missing tiles.

580 - Toilet Room

Not In Compliance

922 KAR 2:120. Section 10. Toilet, Diapering, and Toiletry Requirements.

(2) A toilet room shall:

- (a) 1. Be provided for each gender; or**
2. A plan shall be implemented to use the same toilet room at separate times;
- (b) Have a supply of toilet paper; and**
- (c) Be cleaned and sanitized daily.**

Findings:

General: Based on observation and interview, the surveyor found that the restroom located off of the School-Age Classroom did not contain any toilet paper. Staff reported that the classroom and restroom would not be utilized until after children arrived from school.

585 - Sink

Not In Compliance

922 KAR 2:120. Section 10. 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 and interview, the following were found:

1. The sinks located in the restroom off of the Preschool Classroom had a thick coating of dust on them and one (1) sink contained what appeared to be dried food particles. Staff reported that children do not wash their hands at the sinks in the restroom, the children wash their hands at the sink located in the classroom.
2. The hot water would not come on at the sink in the restroom located off of the School-Age Classroom. Upon interview, the Director was not aware that the hot water would not turn on.

590 - Toilet

Not In Compliance

922 KAR 2:120. Section 10. 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 and interview, the surveyor found that the toilet inside the restroom located off of the School-Age Classroom was not maintained in a clean condition as the toilet had not been flushed. Staff reported that the restroom located off of the School-Age Classroom would not be utilized until children arrived from school.

Hygienic Practices

Not In Compliance

625 - Diaper Changing Area/Surface

Not In Compliance

922 KAR 2:120. Section 10. Toilet, Diapering, and Toiletry Requirements.

(10) When a child is diapered, the child shall:

- (b) Be placed on a surface that is:**
 - 1. Clean;**
 - 2. Padded;**
 - 3. Free of holes, rips, tears, or other damage;**
 - 4. Nonabsorbent;**
 - 5. Easily cleaned; and**
 - 6. Free of any items not used for diaper changing.**

Findings:

General: Based on observation and interview, the following were found:

1. There was a tear in the changing mat located in the Younger Infant's Classroom. Staff reported that there replacement changing mats available.
2. There was not a padded changing surface in the Older One's Classroom. Staff stated they had just took the changing mat out that morning with intentions of replacing it with a new one.
3. There was not a padded changing surface in the Older Two's Classroom. Staff reported that there replacement changing mats available.

640 - Children's Individual Items

Not In Compliance

922 KAR 2:120. Section 10. Toilet, Diapering, and Toiletry Requirements.

(14) Combs, towels or washcloths, brushes, and toothbrushes used by a child shall be:

- (a) Individually stored in separate containers; and
- (b) Plainly labeled with the child's name.

Findings:

General: Based on observation and interview, children's personal items such as coats and jackets were hanging under the cubbies in the Older Three's Classroom and the Preschool Classroom. The items were hanging in such a manner that they were touching creating a risk of cross contamination. Staff reported they just recieved new bags to hang the items in but have not started using them yet.

First Aid/Medication

Not In Compliance

655 - First Aid Supplies

Not In Compliance

922 KAR 2:120. Section 7. First Aid and Medicine.

(1) First aid supplies shall:

- (a) Be available to provide prompt and proper first aid treatment;
- (b) Be stored out of reach of a child;
- (c) Be periodically inventoried to ensure the supplies are current;
- (d) If reusable, be:
 - 1. Sanitized; and
 - 2. Maintained in a sanitary manner; and
- (e) Include:

- 1. Liquid soap;
- 2. Adhesive bandages;
- 3. Sterile gauze;
- 4. Medical tape;
- 5. Scissors;
- 6. A thermometer;
- 7. Flashlight;
- 8. Cold pack;
- 9. First aid book;
- 10. Disposable gloves; and
- 11. A cardiopulmonary resuscitation mouthpiece protector.

Findings:

General: Based on observation and interview, the surveyor found that the first aid kit did not contain any adhesive bandages. The Director stated that they had ran out of bandages the day before and had not yet replenished them.

670 - Medication

Not In Compliance

922 KAR 2:120. Section 7. First Aid and Medicine.

(6) Medication, including refrigerated medication, shall be:

- (a) Stored in a separate and locked place, out of the reach of a child;
- (b) Kept in the original bottle; and
- (c) Properly labeled.

(7) Medication shall not be given to a child if the expiration date on the bottle has passed.

Findings:

General: Based on observation and interview, the surveyor found a container of Vaseline inside an unlocked cabinet in the Older One's Classroom. When questioned about where medications are stored the staff showed the surveyor a plastic box that did not have a lock on it. Staff stated that all that is the medicine storage box is diaper creams.

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

Not In Compliance

825 - Transit/School Bus

Not In Compliance

922 KAR 2:120. Section 12. Transportation.

(5) Transportation provided by licensed public transportation or a school bus shall comply with subsections (1) and (2) of this section.

Findings:

General: Based on review of documentation and interview, the Director stated the facility uses Miller Transportation for their field trips. He was not able to locate a third party agreement stating this arrangement.

Inspection Report**Food Service****Not In Compliance****1050 - Menu****Not In Compliance****922 KAR 2:120. Section 9. Food and Meal Requirements.****(16) A weekly menu shall be:**

- (a) Prepared;**
- (b) Dated;**
- (c) Posted in advance in a conspicuous place;**
- (d) Kept on file for thirty (30) days; and**
- (e) Amended in writing with any substitutions on the day the meal is served.**

Findings:

General: Based on review of documentation and interview, the surveyor found that a menu was not posted in a conspicuous location. Staff provided menus for the surveyor to review and explained that the menu is being reworked. Staff stated the menu is generally posted in the office window.

Children's Records**Not In Compliance****1070 - Immunization****Not In Compliance****922 KAR 2:110. Section 3. 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 and interview, there were eight (8) children's files (DOE: 1/4/16, 8/5/16, 8/5/16, 2/18/14, 11/13/15, 11/13/15, 11/13/15, 11/13/15) presented for review that did not contain current immunization certificates. The Director and Owner expressed that they thought they had obtained all updated immunization certificates.

1075 - Enrollment Information**Not In Compliance****922 KAR 2:110. Section 3. 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 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 situation 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 and interview, the following was found:

- 1. There were five (5) children's files (DOE: 11/3/14, 11/13/15, 11/13/15, 11/13/15, 11/13/15) presented for review that did not contain the preferred hospital name or telephone number.
 - 2. There were four (4) children's files (DOE: 11/13/15, 11/13/15, 11/13/15, 11/13/15) presented for review that did not contain the preferred physician's name or telephone number.
- Upon interview, the Director stated he was not aware the information was missing from the file and noted that one (1) of the children is no longer enrolled.

Written Documentation**Not In Compliance****1085 - Evacuation Plan****Not In Compliance****922 KAR 2:090. Section 5. Evacuation Plan.**

(1) A licensed child-care center shall have a written evacuation plan in the event of a fire, natural disaster, or other threatening situation that may pose a health or safety hazard for a child in care in accordance with KRS 199.895.

Findings:

General: Based on review of documentation and interview, the surveyor found that the Emergency Preparedness Plan did not contain a designated offsite safe evacuation location. Upon interview, the Director stated that they do not have an offsite safe evacuation location.

1095 - Daily Attendance Records

Not In Compliance

922 KAR 2:110. Section 3. Records.

(1) A child-care center shall maintain:

(c) Daily attendance records documenting the arrival and departure time of each child, including records that are required in accordance with 922 KAR 2:160, Section 13, if a child receives services from the child-care center through the Child Care Assistance Program;

Findings:

General: Based on review of documentation, observation, and interview, the surveyor found that there were twelve (12) children present in the Toddler Classroom; however, there were only six (6) children signed in per the daily attendance sheet. Staff confirmed that twelve (12) children were present and stated that parents sign the children in and out.

1105 - Professional Development

Not In Compliance

922 KAR 2:110. Section 3. 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 and interview, the surveyor found seven (7) employee files (DOH: 10/12/09, 9/30/15, 9/30/91, 10/20/03, 12/6/04, 8/15/00, 10/14/96) that did not contain an annual professional development plan. The Director stated that he had distributed the professional development plans to all staff but had not received all of them back yet.

1115 - Earthquake/Tornado Drills

Not In Compliance

922 KAR 2:110. Section 3. Records.

(1) A child-care center shall maintain:

(h) A written record of quarterly practiced earthquake drills and tornado drills detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3;

Findings:

General: Based on review of documentation and interview, the surveyor found that there was not a tornado or earthquake drill documented for July- September of 2016. The Director could not confirm whether or not a tornado or earthquake drill had been conducted.

1120 - Fire Drills

Not In Compliance

922 KAR 2:110. Section 3. Records.

(1) A child-care center shall maintain:

(i) A written record of practiced fire drills conducted monthly detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3;

Findings:

General: Based on review of documentation and interview, the surveyor found that a fire drill was not documented for the month of December 2016. The Director could not confirm if a fire drill had been conducted during that month.

1140 - Fire Drills

Not In Compliance

922 KAR 2:120. Section 3. General Requirements.

(12) A fire drill shall be conducted during hours of operation:

- (a) At least monthly; and**
- (b) Documented.**

Findings:

General: Based on review of documentation and interview, the surveyor found that a fire drill was not documented for the month of December 2016. The Director could not confirm if a fire drill had been conducted during that month.

1145 - Earthquake/Tornado Drills

Not In Compliance

922 KAR 2:120. Section 3. General Requirements.

(13) An earthquake drill and a tornado drill shall be conducted during hours of operation:

- (a) At least quarterly; and**
- (b) Documented.**

Findings:

General: Based on Review of Documentation, and interview, the surveyor found that there was not a tornado or earthquake drill documented for July- September of 2016. The Director could not confirm whether or not a tornado or earthquake drill had been conducted.

Inspection Report		
	Posted Documentation	Not In Compliance
1155 - Posting Requirements		Not In Compliance
922 KAR 2:110. Section 2. General. (7) In addition to the posting requirement of KRS 199.898(3), a child-care center shall post the following in a conspicuous place and make available for public inspection: (a) Each statement of deficiency and civil penalty notice issued by the cabinet during the current licensure year; (b) Each plan of correction submitted by the child-care center to the cabinet during the current licensure year; (c) Information on the Kentucky Consumer Product Safety Program and the program's website as specified in KRS 199.897; (d) A description of services provided by the child-care center, including: 1. Current rates for child care; and 2. Each service charged separately and in addition to the basic rate for child care; (e) Minimum staff-to-child ratios and group size established in 922 KAR 2:120; and (f) Daily schedule.		
Findings: General: Based on observation and interview, the following were found: 1. The center failed to post the previous years plan of correction as required. The last plan of correction posted was dated for 2015. The Director reported that the 2016 plan of correction had been posted but must have fallen down or been moved. 2. A daily schedule was not posted in the Younger Infant's Classroom. Staff reported it is usually posted next to the door but was not able to locate it.		
	Animals	In Compliance