Andy Beshear

GOVERNOR

Provider Name: Kountry Kids Childcare

Owner(s): Baker, Janie Rachelle



CABINET FOR HEALTH AND FAMILY SERVICES **OFFICE OF INSPECTOR GENERAL**

Melissa A. Moore, Director

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Eric Friedlander SECRETARY

Adam Mather **INSPECTOR GENERAL**

Inspection Report

Provider Information

Provider Type: LICENSED TYPE I Provider Address: 1070 N. Laurel Road, London, KY, 40741

No. of Children Present: 34

CLR No: 1381182 Capacity: 40 Director(s): Baker, Janie Rachelle

Not In Compliance

Not In Compliance

In Compliance

In Compliance

Inspection Type: Renewal Application

Date Initiated: 02/01/2021 9:10 AM

Inspection Information

Inspection No: 305199

Inspection Report

Date Concluded: 02/01/2021 11:30 AM

Background Checks

5 - Background check/left alone/dismissed/relocated

922 KAR 2:280. Section 3. Implementation and Enforcement.

(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.

(2) A child care staff member hired on or after April 1, 2018, shall:

(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

(b)1. Have submitted to the background checks required in accordance with this administrative regulation;

2. Not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative

regulation: and

3. Be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.

Findings:

General: Based on review of documentation, the surveyor found the following:

1. A staff (DOH: 09/22/20) file did not contain a completed Criminal Records background check. The staff file contained an original Child Abuse/Neglect background check only dated for 10/07/20. During interview, the Director stated that the staff member was a teacher and that the staff member has worked alone with children. The surveyor observed the staff member to be working alone with children in the Two Year Old Classroom. The Director stated that the staff member had a Criminal Records background check completed; however, the documentation was not available for review. Based on review of the Kentucky National Background Check Service, the staff person did not have a completed background check.

2. A staff (DOH: 02/24/20) file did not contain a completed Child Abuse/Neglect background check or Criminal Records background check. During interview, the Director stated that the staff member was a floater and that the staff member has not worked alone with children. The surveyor did not observe the staff member working alone with the children. The Director stated that the staff member submitted to a background check through the Kentucky National Background Check Service; however, the results are pending. Based on review of the Kentucky National Background Check Service, the staff person's background check showed in process.

Supervision

Staffing Requirements



Inspection Report General Administration

Not In Compliance Not In Compliance

Not In Compliance

155 - Liability Insurance

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

(8) To qualify for a preliminary license, or maintain a regular license, a child-care center shall:(d) Provide written proof of liability insurance coverage of at least \$100,000 per occurrence;

Findings:

General: Based on review of documentation, the surveyor found that the center's liability insurance was no longer current as of 1/11/19. During interview with the Director, the surveyor was informed that the center's insurance is current; however, verification was not presented during the renewal survey.

180 - Plan of Correction/15 days

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 03/23/2021 AND AS OF 03/25/2021, THE PLAN OF CORRECTION HAS NOT BEEN RECEIVED.

	Director Requirements Not In Compliance	
345 - Staff Evaluation	Not In Compliance	
922 KAR 2:090. Section 10. Director Requirements and Respons	ibilities.	
(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: Based on review of documentation, the surveyor found the following:

1. A staff's (DOH: 03/11/13) file contained an annual written performance evaluation dated for 11/12/18; therefore, the evaluation was not completed annually.

2. A staff's (DOH: 10/20/15) file contained an annual written performance evaluation dated for 11/12/18; therefore, the evaluation was not completed annually.

3. A staff's (DOH: 02/02/18) file contained an annual written performance evaluation dated for 11/12/18; therefore, the evaluation was not completed annually.

4. A staff's (DOH: 12/07/19) file did not contain an annual written performance evaluation; therefore, an evaluation was not completed annually.

5. A staff's (DOH: 07/12/19) file did not contain an annual written performance evaluation; therefore, an evaluation was not completed annually.

Through interview with the Director, the surveyor learned the written performance evaluations were not available for review.

Employee Records 90 - Educational Requirements 922 KAR 2:090. Section 11. 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	Not In Compliance
(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	
 High school diploma: GED or qualifying documentation from a comparable educational entity; or Commonwealth Child Care Credential as described in 922 KAR 2:250; 	+ a:
Findings:	
General: Based on review of documentation, the surveyor found the following:	
1. A staff's (DOH: 12/14/20) file did not contain verification of a High School Diploma, GED or Commonwealth Child Care Credential.	
2. A staff's (DOH: 09/22/20) file did not contain verification of a High School Diploma, GED or Commonwealth Child Care Credential.	
3. A staff's (DOH: 02/24/20) file did not contain verification of a High School Diploma, GED or Commonwealth Child Care Credential.	
Programming	Not In Compliance
95 - Bedding/Toys in Crib	Not In Compliance

Findings:

General: Based on observation, the surveyor found a four-month-old child laying in a crib with a loose blanket.



	Inspection Report	
	Premises	Not In Compliance
540 - Premises Requirements		Not In Compliance
 922 KAR 2:120. Section 4. Premises Requirements. (1) The premises shall be: (a) Suitable for the purpose intended; (b) Kept clean and in good repair; 		
Findings:		
General: Based on observation, the surveyor found the follow	ving:	
1. The carpet in the One Year Old Classroom contained debr	ris and was stained.	
2. The carpet in the School Age Classroom was stained.		
3. A rug in the School Age Classroom contained debris and v	was stained.	
4. One (1) round rug and one (1) square rug contained stains	s in the Four-Five Year Old Classroom.	
5. One (1) square rug and one (1) round blue rug contained of	debris in the Two Year Old Classroom.	
580 - Floors, Walls, Ceilings		Not In Compliance
922 KAR 2:120. Section 4. Premises Requirements. (9) Floors, walls, and ceilings shall be smooth, in g	ood repair, and constructed to be easily cleaned.	
Findings:		
General: Based on observation, the surveyor found the follow	ving:	
1. The walls in the One Year Old Classroom contained stains		
1. The wails in the One Year Old Classroom contained stains		
2. The walls and baseboards in the Two Year Old Classroom		
2. The walls and baseboards in the Two Year Old Classroom 650 - Toilet	n contained stains.	Not In Compliance
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 2. The walls and baseboards in the Two Year Old Classroom 650 - Toilet 922 KAR 2:120. Section 10. Toilet, Diapering, and To (4) Each toilet shall: (a) Be kept in clean condition; (b) Be kept in good repair; (c) Be in a lighted room; and 	n contained stains.	Not In Complianc
2. The walls and baseboards in the Two Year Old Classroom 550 - Toilet 922 KAR 2:120. Section 10. Toilet, Diapering, and To (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.	oiletry Requirements.	Not In Compliance
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Findings:

General: Based on review of documentation, the surveyor was presented with a food service permit with an expiration date of 12/31/19. Through interview with the Director, the surveyor learned that a new food service permit has not yet been received in the mail.



1040 - Kitchen Equipment Clean and Sanitary

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

(7) The following shall be clean and sanitary:

(a) Eating and drinking utensils;

(b) Kitchenware;

(c) Food contact surfaces of equipment;

(d) Food storage utensils;

(e) Food storage containers;

(f) Cooking surfaces of equipment; and

(g) Nonfood contact surfaces of equipment.

Findings:

General: Based on observation, the surveyor found two (2) refrigerators located in the kitchen that contained debris in the bottom shelf of the refrigerators; therefore, the refrigerators were not clean.

Children's Records	In Compliance
Written Documentation	Not In Compliance
70 - 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: 03/11/13) file contained a professional development plan dated for 11/12/18; therefore, the plan was not completed annually an updated professional development plan.	. The surveyor was not presented with
2. A staff's (DOH: 10/20/15) file contained a professional development plan dated for 11/12/18; therefore, the plan was not completed annually an updated professional development plan.	. The surveyor was not presented with
3. A staff's (DOH: 02/02/18) file contained a professional development plan dated for 11/12/18; therefore, the plan was not completed annually an updated professional development plan.	. The surveyor was not presented with
4. A staff's (DOH: 03/11/13) file contained a professional development plan that was not dated; therefore, it could not be determined that the pl surveyor was not presented with an updated professional development plan.	an was completed annually. The
5. A staff's (DOH: 12/07/19) file did not contain a professional development plan; therefore, a plan was not completed annually. The surveyor w professional development plan.	vas not presented with an updated
6. A staff's (DOH: 07/12/19) file did not contain a professional development plan; therefore, a plan was not completed annually. The surveyor w professional development plan.	vas not presented with an updated
Through interview with the Director, the surveyor learned that the professional development plans were not available for review.	
Posted Documentation	In Compliance
Animals	In Compliance

Emergency Regulation

Signature of Provider/Representative



In Compliance