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Inspection Report

<b>Provider Name:</b> Stanton Christian Church Training His Treasures	<b>Provider Information</b> <b>Provider Type:</b> LICENSED TYPE I	<b>CLR No:</b> L383151
<b>Provider Address:</b> 100 West Church St., Stanton, KY, 40380		<b>Capacity:</b> 74
<b>Owner(s):</b> Stanton Christian Church of Stanton, Kentucky, Inc.		<b>Director(s):</b> Fain, Phyllis Marie

<b>Inspection Type:</b> Renewal Application	<b>Inspection Information</b>	<b>Inspection No:</b> 217443
<b>Date Initiated:</b> 10/27/2016 10:45 AM	<b>Date Concluded:</b> 10/27/2016 1:45 PM	
	<b>No. of Children Present:</b> 42	

Inspection Report	
<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>Not In Compliance</b>
<b>260 - Staff Evaluation</b>	<b>Not In Compliance</b>
<b>922 KAR 2:110. Section 4. Director Requirements and Responsibilities.</b> <b>(1) Effective with the adoption of this administrative regulation, a director shall:</b> <b>(j) Assess each staff person's interaction with children in care and classroom performance through an annual written performance evaluation;</b>	
<b>Findings:</b>	
General: Based on review of documentation and interview, the surveyor found that an employee record presented for review (DOH: 08/01/13) did not contain an annual evaluation. Upon interview, the staff in charge was not aware the evaluation was missing from the employee's file.	
<b>275 - Caregiver Alone</b>	<b>Not In Compliance</b>
<b>922 KAR 2:110. Section 4. Director Requirements and Responsibilities.</b> <b>(1) Effective with the adoption of this administrative regulation, a director shall:</b> <b>(n) Assure that a person acting as a caregiver of a child in care shall not be left alone with a child, if the licensee has not received the results of the background checks as described in Section 3(1)(e)6 of this administrative regulation;</b>	
<b>Findings:</b>	
General: Based on review of documentation and interview, the file presented for review for an employee (DOH: 08/25/16) did not contain a criminal records check for a previous state of residence. The employee's file did contain record of an FBI check being submitted on 09/02/16; however, the results had not yet been returned. The FBI check was not submitted within five (5) days of the employee's date of hire. The surveyor observed the employee working alone with seven (7) two (2) to three (3) year-old children in the music room. Upon interview, the staff in charge was not aware that the employee did not have all required background checks.	

**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 file presented for review for an employee (DOH: 08/25/16) did not contain a criminal records check for a previous state of residence. The employee's file did contain record of an FBI check being submitted on 09/02/16; however, the results had not yet been returned. The FBI check was not submitted within five (5) days of the employee's date of hire. The surveyor observed the employee working alone with seven (7) two (2) to three (3) year-old children in the music room. Upon interview, the staff in charge was not aware that the employee did not have all required background checks.

**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 and interview, the child care center failed to maintain personnel files as required:

1. An employee's (DOH: 03/15/16) TB test was not completed until 07/08/16; therefore, negative tuberculin verification was not obtained prior to employment. Staff in charge stated that the employee had record of a negative turberculin test upon employment at the center; however, the date was not legible. Staff in charge reported that after multiple failed attempts to obtain a legible copy the employee was asked to obtain a new tuberculin skin test.
2. An employee's (DOH: 07/01/16) TB test was not completed until 07/29/16; therefore, negative tuberculin verification was not obtained prior to employment. Staff in charge stated that the child care center only operates during the school year; therefore, the employee did not work with children until after the negative tuberculin test results were obtained.
3. The surveyor found that the file for one (1) staff (DOH: 08/25/16) 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. Staff in charge was not aware that the employee had not obtained a tuberculin skin test.
4. The surveyor found that the files for two (2) staff (DOH: 07/15/15 and 09/27/16) did not contain verification of a High School Diploma, GED, or Commonwealth Child Care Credential. Staff in charge reported that the proof of education for one (1) employee (DOH: 07/15/15) had been submitted; however, she was not aware of where it would be located since it was not in the employee file.
5. The surveyor found that an employee record presented for review (DOH: 08/01/13) did not contain an annual evaluation. Upon interview, the staff in charge was not aware the evaluation was missing from the employee's file.

**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 the files for two (2) staff (DOH: 07/15/15 and 09/27/16) did not contain verification of a High School Diploma, GED, or Commonwealth Child Care Credential. Staff in charge reported that the proof of education for one (1) employee (DOH: 07/15/15) had been submitted; however, she was not aware of where it would be located since it was not in the employee file.

**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, the following was found:

1. An employee's (DOH: 03/15/16) TB test was not completed until 07/08/16; therefore, negative tuberculin verification was not obtained prior to employment. Staff in charge stated that the employee had record of a negative turberculin test upon employment at the center; however, the date was not legible. Staff in charge reported that after multiple failed attempts to obtain a legible copy the employee was asked to obtain a new tuberculin skin test.
2. An employee's (DOH: 07/01/16) TB test was not completed until 07/29/16; therefore, negative tuberculin verification was not obtained prior to employment. Staff in charge stated that the child care center only operates during the school year; therefore, the employee did not work with children until after the negative tuberculin test results were obtained.
3. The surveyor found that the file for one (1) staff (DOH: 08/25/16) 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. Staff in charge was not aware that the employee had not obtained a tuberculin skin test.

**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 one (1) of the two (2) persons identified as substitutes (DOH: 08/01/13) do not meet the staff requirements of this administrative regulation for a Type One (1) center as the substitute had only obtained six (6) hours of cabinet-approved early care and education annual training hours from 08/01/15 through 07/31/16. Staff in charge reported that it is difficult getting staff to complete required annual training.

**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 one (1) of the two (2) persons identified as substitutes (DOH: 08/01/13) do not meet the staff requirements of this administrative regulation for a Type One (1) center as the substitute had only obtained six (6) hours of cabinet-approved early care and education annual training hours from 08/01/15 through 07/31/16. Staff in charge reported that it is difficult getting staff to complete required annual training.

**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, ECE-TRIS, and interview, the following was found:

1. The surveyor found verification that three (3) staff (DOH: 08/01/13) had obtained only eleven (11) hours of cabinet-approved early care and education annual training.
2. The surveyor found verification that one (1) substitute (DOH: 08/01/13) had obtained only six (6) hours of cabinet-approved early care and education annual training.
3. The surveyor found no verification that a staff (DOH: 07/01/16) had obtained six (6) hours of cabinet-approved orientation training within the first three (3) months of employment.
4. The surveyor found that a staff (DOH: 03/01/16) obtained six (6) hours of cabinet-approved orientation training on 07/05/16; therefore, it had not been completed within three months of the staff's date of hire.
5. The surveyor found that a staff (DOH: 03/15/16) obtained six (6) hours of cabinet-approved orientation training on 10/06/16; therefore, it had not been completed within three months of the staff's date of hire. Staff in charge stated that it is difficult to get staff to complete their required training within required time frames.

**Programming**

**In Compliance**

**Premises**

**Not In Compliance**

**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 were two (2) pairs of scissors, that were not safety scissors, in a blue craft caddy next to the trash can in the Four's Classroom. The scissors were accessible to children. Staff stated the scissors are supposed to be locked up.
2. There were some large push pins and a staple remover on a shelf over the puzzle area in the Four's Classroom. The shelf was approximately four (4) feet high; therefore, the items were accessible to the four (4) year-old and five (5) year-old children in the classroom. Staff stated they thought the items were high enough for the children not to reach them.
3. There was one (1) pair of scissors, that were not safety scissors, located in an unlocked drawer next to the nap mats in the Three's Classroom. The scissors were accessible to the children. Staff stated that the drawer is typically locked.

**505 - 35 Square Feet per Child**

**Not In Compliance**

**922 KAR 2:120. Section 4. Premises Requirements.**

**(6) Exclusive of the kitchen, bathroom, hallway, and storage area, there shall be a minimum of thirty-five (35) square feet of space per child.**

**Findings:**

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

1. There were twelve (12) children observed leaving the Four's Classroom. Upon interview, staff stated that all twelve (12) children were in the Four's Classroom. Per the child care center's diagram, the licensed capacity for the Four's Classroom is ten (10) children; therefore, the capacity of the Four's Classroom was exceeded by two (2) children on the date of the survey.
2. There were twelve (12) children observed in the Three's Classroom. Upon interview, staff stated that twelve (12) children were present in the Three's Classroom. Per the child care center's diagram, the licensed capacity for the Three's Classroom is eleven (11) children; therefore, the capacity of the Three's Classroom was exceeded by one (1) child on the date of the survey.

**Hygienic Practices**

**In Compliance**

**First Aid/Medication**

**In Compliance**

**Outdoor Play Area**

**In Compliance**

**Equipment**

**In Compliance**

**Transportation**

**Not Applicable**

**Inspection Report**

**Food Service**

**Not In Compliance**

**940 - 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 of Public Health's food safety standards and permits, established in KRS Chapter**

**217.**

**Findings:**

General: Based on observation and interview, the temperature for the freezers located in the kitchen, which are used to store frozen food for the children, were reading at ten (10) degrees Fahrenheit and five (5) degrees Fahrenheit. Staff reported that the temperature is checked regularly.

**Children's Records**

**Not In Compliance**

**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 surveyor found that three (3) of the ten (10) children's records reviewed (DOE: 08/01/16, 08/29/16, and 02/11/16) did not contain the name or contact information of the family's preferred hospital. Staff in charge stated that they were not aware that the information was missing from the children's files.

**Written Documentation**

**Not In Compliance**

**1090 - Policies and Procedures**

**Not In Compliance**

**922 KAR 2:110. Section 2. General.**

**(5) Program policies and procedures shall:**

**(a) Be in writing; and**

**(b) Include:**

**1. Staff policies;**

**2. Job descriptions;**

**3. An organization chart;**

**4. Chain of command; and**

**5. Other procedures necessary to ensure implementation of:**

**a. KRS 199.898, Rights for children in child-care programs and their parents, custodians, or guardians - posting and distribution requirements;**

**b. 922 KAR 2:090, Child-care center licensure;**

**c. 922 KAR 2:120, Child-care center health and safety standards; and**

**d. This administrative regulation.**

**Findings:**

General: Based on observation and interview, the surveyor found that the Children's and Parent's Rights were not posted. Upon interview, the staff in charge stated that the Children's and Parent's Rights had been posted with the child care center's other required postings; however, she was not able to locate them at the time of the inspection.

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1135 - Orientation Procedure

Not In Compliance

922 KAR 2:120. Section 2. Child Care Services.

(3)(b) The program shall include:

2. Written policy that specifies that the procedures that were taught at the orientation training shall be implemented by each child-care center staff member.

Findings:

General: Based on review of documentation, and interview, the surveyor was not presented with an Orientation Training Policy for the child care center which states that staff will obtain the state required orientation within three (3) months of hire and implement what is learned in the classroom. Staff in charge was not aware of the child care center having such a policy or where it would be located.

Posted Documentation

Not In Compliance

1165 - Daily Activities

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:

(h) Post a schedule of daily activities, to include dates and times of activities to be conducted with the children in each classroom;

Findings:

General: Based on observation and interview, the surveyor found that there was not a lesson plan posted in the Infant Classroom. Upon interview, staff stated they had not updated the lesson plan and therefore did not have one posted.

Animals

In Compliance

Signature of Provider/Representative

Title

Date