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**Andy Beshear**GOVERNOR

# CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

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INSPECTOR GENERAL

## **Inspection Report**

**Provider Information** 

Provider Name: Northern Kentucky Montessori
Academy, Inc.

Provider Type: LICENSED TYPE I

Provider Address: 2625 Crescent Springs Road, Crescent Springs, KY, 41017

Owner(s): Northern Kentucky Montessori Academy, Inc.

**CLR No:** L355513

Capacity: 182

Director(s): Preziosi, Julia A

Inspection No: 278863

**Inspection Information** 

Inspection Type: Renewal Application

Date Initiated: 03/28/2019 10:05 AM

Date Concluded: 03/28/2019 12:25 PM

No. of Children Present: 53

**Inspection Report** 

**Background Checks** 

Supervision

**Staffing Requirements** 

**General Administration** 

Not In Compliance

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 04/29/2019 AND AS OF 05/17/2019, THE PLAN OF CORRECTION HAS NOT BEEN RECEIVED.

## **Director Requirements**

Not In Compliance
Not In Compliance

In Compliance

In Compliance
In Compliance

**Not In Compliance** 

# 350 - Health, Safety, Comfort 922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

(1) A director shall:

180 - Plan of Correction/15 days

(I) Assure the health, safety, and comfort of each child;

### Findings:

General: Based on observation, the following was found:

- 1.) There were two (2) uncovered electrical outlets in the cubby room off of the multi-purpose classroom.
- 2.) In the Montessori one classroom, there was a laptop cord accessible to the children in care. The laptop was located on top of a shelf and the cord was plugged into an outlet near the shelf.



#### Inspection Report

#### **Employee Records**

385 - Personnel File Not In Compliance

922 KAR 2:090. Section 9. 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. Documentation of compliance with tuberculosis screening in accordance with Section 11(1)(b) of this administrative regulation; and
- 5. The results of background checks conducted in accordance with 922 KAR 2:280;

#### Findings:

General: Based on review of documentation, it was found that two (2) staff did not have an annual performance evaluation on file at the facility. The dates of hire for these staff are: 08/19/2004 and 10/14/2014.

395 - 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, it was found that one (1) staff did not have evidence of an updated TB skin test. The one in the staff's file had exceeded the two (2) year time frame. The date of hire for this staff is 10/14/2014.

410 - Training Not In Compliance

### 922 KAR 2:090. Section 11. Staff Requirements.

- (16) 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 cabinet-approved 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 cabinet-approved pediatric abusive head trauma training completed once every five (5) years.

#### Findings:

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

- 1.) Three (3) staff did not have evidence of completing the required pediatric abusive head trauma training within the last five (5) years. The hire dates for these staff are: 03/01/2014, 10/01/2012, and 08/01/2013.
- 2.) Two (2) staff did not complete the required fifteen (15) hours of annual training. The hire dates for these staff are 08/19/2004 and 10/14/2014.

A review of ECE-TRIS confirmed these findings.

| Programming               | In Compliance     |
|---------------------------|-------------------|
| Premises                  | In Compliance     |
| Hygienic Practices        | In Compliance     |
| First Aid/Medication      | In Compliance     |
| Outdoor Play Area         | In Compliance     |
| Equipment                 | In Compliance     |
| Transportation            | Not Applicable    |
| Food Service/Food Program | In Compliance     |
| Food Service              | In Compliance     |
| Children's Records        | In Compliance     |
| Written Documentation     | Not In Compliance |
|                           |                   |

#### 1170 - Professional Development

Not In Compliance

**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, it was found that three (3) staff did not have evidence of an annual professional development plan on file at the facility. The dates of hire for these staff are: 08/19/2004, 10/14/2014, and 05/01/2017.

**Posted Documentation** 

In Compliance

Animals

In Compliance



