Andy Beshear

GOVERNOR



CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

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Increation Depart

Eric Friedlander SECRETARY

Adam Mather INSPECTOR GENERAL

| | Inspection Report | |
|---|--|------------------------------------|
| Provider Name: Busy Bees Christian Childhood | Provider Information Provider Type: LICENSED TYPE I | CLR No: L383437 |
| Development Center 2, LLC Provider Address: 375 South Ky 1629, Corbin, KY, 40701 | | Capacity: 51 |
| Owner(s): BusyBees Christian Childhood Developme | nt Center 2, LLC | Director(s): Carr, Frankie Carolyn |
| | Inspection Information | |
| Inspection Type: Renewal Application | | Inspection No: 216497 |
| Date Initiated: 09/08/2016 9:12 AM | Date Concluded: 09/09/2016 9:05 AM | |
| | No. of Children Present: 12 | |
| | Inspection Report | |
| | Supervision | In Compliance |
| | Staffing Requirements | In Compliance |
| | General Administration | In Compliance |

Director Requirements

Not In Compliance Not In Compliance

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:

255 - Staff Meeting

General: Based on review of documentation, there was no evidence presented for review that the child care center had conducted at least two (2) staff meetings within the last year.

265 - Health, Safety, Comfort

922 KAR 2:110. Section 4. Director Requirements and Responsibilities.
(1) Effective with the adoption of this administrative regulation, a director shall:
(I) Provide for the health, safety, and comfort of each child;

Findings:

General: Based on observation, the following things were found:

1) There was one (1) uncovered electrical outlet located on the wall by the desk in the pre-school room.

2) There was one (1) plunger located on the floor of the bathroom in the pre-school room. The plunger was within reach and accessible to the children.

3) The plug to the radio was lying on the floor of the two-year-old room. The plug was within reach and accessible to the children.

4) There was one (1) outlet plate cover located on the back wall of the two-year-old room that had a piece broken off of it. The broken plate cover was within reach and accessible to the children.



275 - Caregiver Alone

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

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

(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;

Findings:

General: Based on review of documentation, one (1) staff's file (DOH: 10-8-15) did not contain a completed child abuse and neglect (CA/N) background check, i.e., the CA/N form was present in the file but the results section was not completed. Based on observation, the staff member was working alone in the two-year-old classroom during the surveyor's visit. Based on interview, the director stated the staff member has been left alone with children at the child care center. The director further stated that the staff member is the only teacher present in the two-year-old classroom Monday-Friday from 6:00am until 11:00am.

285 - Parental/Family Involvement Activity

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, there was no documentation presented for review that the child care center had conducted at least one (1) parent and/or family involvement activity within the last year.

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| Emp | loyee | Records |

300 - Background checks/left alone

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, one (1) staff's file (DOH: 10-8-15) did not contain a completed child abuse and neglect (CA/N) background check, i.e., the CA/N form was present in the file but the results section was not completed. Based on observation, the staff member was working alone in the two-year-old classroom during the surveyor's visit. Based on interview, the director stated the staff member has been left alone with children at the child care center. The director further stated that the staff member is the only teacher present in the two-year-old classroom Monday-Friday from 6:00am until 11:00am.

310 - Personnel File

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 of staff files, one (1) staff's file (DOH: 10-8-15) did not contain a completed child abuse and neglect (CA/N) background check, i.e., the CA/N form was present in the file but the results section was not completed. Therefore, the personnel file was not being maintained as required.



Not In Compliance

Not In Compliance

Not In Compliance

Not In Compliance

| 330 - Adequate Substitute(s) 922 KAR 2:110. Section 5. Staff Requirements. (6) Child-care centers shall have available in case of methods. | |
|--|---|
| - | Not In Compliance |
| - | |
| (0) Onnu-cale centers shan have available in case of in- | eed: |
| (a) One (1) qualified substitute staff person for a Type | e II child-care center; or |
| (b) Two (2) qualified substitute staff persons for a Typ | pe I child-care center. |
| Findings: | |
| General: Based on review of documentation of staff files, it was for based on lack of cabinet approved early care and education annu | ound that the three (3) individuals identified as substitutes (DOH: 5-1-12, 5-11-12, 5-1-12) did not meet qualifications ual training hours. |
| 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 | |
| (b) Provide the required documentation to verify com | pliance with this administrative regulation. |
| Findings: | |
| General: Based on review of documentation of staff files, it was for based on lack of cabinet approved early care and education annu | ound that the three (3) individuals identified as substitutes (DOH: 5-1-12, 5-11-12, 5-1-12) did not meet qualifications ual training hours. |
| 340 - Training | Not In Compliance |
| 922 KAR 2:110. Section 5. Staff Requirements. | |
| - | taff person with supervisory authority over a child shall complete the following: |
| (a) Six (6) hours of cabinet-approved orientation within | in the first three (3) months of employment; |
| | education training within the first year of employment, including one and one-half (1 $\frac{1}{2}$) |
| hours of pediatric abusive head trauma training; and | and advantion furing and public mentions of any lawrant including and and |
| (c) Finteen (15) nours of cabinet-approved early care a half (1 $\frac{1}{2}$) hours of pediatric abusive head trauma traini | and education training during each subsequent year of employment, including one and one- |
| Findings: | ng completed once every nice (o) years |
| orientation. 2) Staff with DOH: 5-1-12 completed twelve (12) of the 12 completed thirteen (13) of the required fifteen (15) hours of annine (9) hours of annual training for the training year of 7-22-15 to training year of 7-21-15 to 7-20-16. 6) Staff with DOH: 5-11-12 co | staff files, the following was found: 1) Staff with DOH: 2-4-16 has not completed the required six (6) hours of he required fifteen (15) hours of annual training for the training year 5-1-15 to 4-30-16. 3) Another staff with DOH: 5-1- inual training for the training year of 5-1-15 to 4-30-16. 4) Staff with DOH: 7-22-15 completed one (1) of the required to 7-21-16. 5) Staff with DOH: 7-21-15 completed six (6) of the required nine (9) hours of annual training for the pmpleted twelve (12) of the required fifteen (15) hours of annual training for the training year of 5-11-15 to 5-10-16. 7) red fifteen (15) hours of annual training for the training year of 5-1-15 to 4-30-16. |
| | Programming Not In Compliance |
| 350 - Program of Activities Followed | Not In Compliance |
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| | program: |
| (a) Posted in writing in a conspicuous location with e | |
| (b) Of activities that are individualized and developme | entally appropriate for each child served; |
| | al child's physical, emotional, social, and intellectual growth and well-being; and |
| | ig the following: |
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| | |
| 5. Science; 6. Block building; | |
| 5. Science; | |
| 5. Science; 6. Block building; 7. Tactile activity; 8. Culture; | |
| 5. Science; 6. Block building; 7. Tactile activity; 8. Culture; 9. Indoor or outdoor play in which a child makes use | - , |
| 5. Science; 6. Block building; 7. Tactile activity; 8. Culture; 9. Indoor or outdoor play in which a child makes use 10. A balance of active and quiet play, including grou | - , |
| Science; Block building; Tactile activity; Culture; Indoor or outdoor play in which a child makes use A balance of active and quiet play, including ground the second sec | - , |
| Science; Block building; Tactile activity; Culture; Indoor or outdoor play in which a child makes use A balance of active and quiet play, including group | - , |
| (b) Of activities that are individualized and developme | program: each age group and followed; entally appropriate for each child served; al child's physical, emotional, social, and intellectual growth and well-being; and |

Inspection Report

General: Based on observation of the after-school classroom, there was not a current lesson plan posted, i.e., the lesson plan that was posted was for the week of 8-29-16.

Premises

In Compliance



Inspection Report

Hygienic Practices

| Not In Comp | liance |
|-------------|--------|
| Not In Comp | liance |

625 - Diaper Changing Area/Surface

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.

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| Findings: | | |
| General: Based on observation of the infant/toddler classro | oom, the changing table pad had one (1) tear in it, exposing the inside page | dding; therefore, it cannot be properly sanitized. |
| | First Aid/Medication | Not In Complianc |
| 70 - Medication | | Not In Compliance |
| 922 KAR 2:120. Section 7. First Aid and Medicine. (6) Medication, including refrigerated medication (a) Stored in a separate and locked place, out of (b) Kept in the original bottle; and (c) Properly labeled. (7) Medication shall not be given to a child if the | , shall be: f the reach of a child; | |
| Findings: | | |
| General: Based on observation of the after-school classrood backpack was located on a shelf and was accessible | om, there was one (1) green backpack that contained one (1) bottle of over within reach of the children. Based on interview, the director stated that all the backpack. Furthermore, the director stated this is the child's first week this medication to the child. | I of the children in the child care center eat |
| | Outdoor Play Area | Not In Compliance |
| 95 - Protective Surface | | Not In Compliance |
| (a) Be provided for outdoor play equipment used 1. Climb; 2. Swing; and 3. Slide; and (b) Have a fall zone equal to the height of the equipment. Based on observation of the playaround, there was a standard or observation of the playaround. | | res i.e. the black plastic lining underneath the |
| General: Based on observation of the playground, there wa mulch was visible in several areas of the playground. | as an insufficient amount of mulch under the areas of the climbing structu | ires, i.e. the black plastic lining underneath the |
| | Equipment | In Compliance |
| | Transportation | Not Applicab |
| | Food Service | Not In Compliane |
| 35 - Refrigerator | | Not In Complian |
| 922 KAR 2:120. Section 8. Kitchen Requirements. (4) A cold-storage facility used for storage of periods (a) Have an indicating thermometer or other app (b) Be in a safe environment for preservation; ar (c) Be forty (40) degrees Fahrenheit or below. | ishable food in a nonfrozen state shall: propriate temperature measuring device; | |
| Findings: | | |
| · • | the kitchen had a temperature reading of forty-two (42) degrees Fahrenhe | |
| 40 - Frozen Food | | Not In Complian |
| 922 KAR 2:120. Section 8. Kitchen Requirements. (5) Frozen food shall be: (a) Kept at a temperature of zero degrees Fahre (b) Thawed: 1. At refrigerator temperatures; 2. Under cool, potable running water; 3. As part of the cooking process; or | | |

General: Based on observation, the freezer located in the kitchen had a temperature reading of four (4) degrees Fahrenheit.

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Inspection Report

| 960 - Bottles | Not in Compliance |
|---|--|
| 922 KAR 2:120. Section 8. Kitchen Requirements. (9) Bottles shall be: (a) Individually labeled; (b) Promptly refrigerated; (c) Covered when not in use; and (d) Consumed within one (1) hour of being heated or removed from the refrigerator. | Not In Compliance |
| Findings: | |
| General: Based on observation of the infant/toddler classroom, there was one (1) uncovered bottle located or small amount of milk. | n a shelf by the door. The bottle was not being used and contained a |
| Children's Records | In Compliance |
| Written Documentation | Not In Compliance |
| 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 of staff files, the following items were not present: | |
| 1) Staff with DOH: 5-1-12 did not have a completed annual performance evaluation. | |
| 2) Staff with DOH: 7-21-15 did not have a completed annual performance evaluation. | |
| 3) Staff with DOH: 5-11-12 did not have a completed annual performance evaluation. | |
| 4) Another staff with a DOH: 5-1-12 did not have a completed annual performance evaluation. | |
| 5) A third staff with a DOH: 5-1-12 did not have a completed annual performance evaluation. | |
| Posted Documentation | In Compliance |

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In Compliance

