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**Andy Beshear GOVERNOR** 

Provider Name: Wendy's Wonderland III

# CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

Melissa A. Moore, Director **Division of Regulated Child Care** 

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**Eric Friedlander SECRETARY** 

**Adam Mather INSPECTOR GENERAL** 

# Inspection Report

**Provider Information** 

Provider Type: LICENSED TYPE I

Capacity: 49

Owner(s): Wendy's Wonderland Inc.

Provider Address: 4996 S. Hwy 27, Somerset, KY, 42501

Director(s): Davis, Tiffany

Inspection No: 319503

**CLR No:** 1 383471

Inspection Type: Renewal Application

Date Initiated: 02/01/2022 1:15 PM

**Inspection Information** 

Date Concluded: 02/01/2022 3:45 PM

No. of Children Present: 13

**Inspection Report** 

**Background Checks** 

**Supervision** 

**Staffing Requirements** 

**General Administration** 

**Not In Compliance** 

In Compliance

In Compliance

In Compliance

# 225 - Licensee Responsibility

Not In Compliance

922 KAR 2:090. Section 8. General.

- (1) A licensee shall:
- (a) Be responsible for the operation of the child-care center pursuant to this administrative regulation, 922 KAR 2:120, and 922 KAR 2:280; and
- (b) Protect and assure the health, safety, and comfort of each child.

General: Based on observation, the surveyor discovered the following:

- 1. Two (2) plungers were placed near the commode in the restroom located beside the School Age One Room.
- 2. Liquid hand soap placed on a sink in the Boy's Restroom. The restroom is located beside the Preschool Room. The label on the hand soap indicated "keep out of reach of children"

Therefore, the items were accessible to the children causing a potential health and safety issue for the children.

**Director Requirements** 

In Compliance

**Employee Records** 

**Not In Compliance 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:

405 - TB Verification

General: Based on review of documentation, the surveyor discovered that a staff's personnel file (DOH: 8/6/21) contained a negative tuberculin result that was no longer current after 8/8/16. Staff stated that the staff member had a more current result; however, she was unable to present it to the surveyor during the visit.



435 - 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 completed within the first three (3) months of employment in a child-care program;
- (b) Nine (9) hours of cabinet-approved early care and education training within the first year of employment in a child care program, 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 completed between July 1 and the following June 30 of each subsequent year of employment in a child care program, including one and one-half (1  $\frac{1}{2}$ ) hours of cabinet-approved pediatric abusive head trauma training completed once every five (5) years.
- (17) A staff person's compliance with training requirements of this section shall be verified through the cabinet-designated database maintained pursuant to 922 KAR 2:240.

#### Findings:

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

- 1. ECE-TRIS and the personnel file for a staff (DOH: 5/2/16) reflected that the employee completed the cabinet-approved pediatric abusive head trauma training on 5/2/16. Pediatric abusive head trauma training must be completed once every five (5) years; therefore, the training needs to be taken again. Staff stated that the employee thought they had completed the pediatric abusive head trauma training in 2021; however, she was unable to provide documentation to verify to the surveyor during the visit.
- 2. ECE-TRIS and the personnel file for a staff (DOH: 8/6/21) revealed that the employee completed zero (0) of the required fifteen (15) hours of cabinet-approved early care and education training.
- 3. The personnel file of a staff (DOH: 8/6/21) revealed that the employee failed to complete six (6) hours of cabinet-approved orientation training. Review of ECE-TRIS confirmed that the staff member failed to complete six (6) hours of cabinet-approved orientation within the first three (3) months of employment.

Programming	In Compliance
Premises	Not In Compliance

#### .

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

(1) The premises shall be:

585 - Premises Requirements

- (a) Suitable for the purpose intended;
- (b) Kept clean and in good repair;

## Findings:

General: Based on observation, the surveyor discovered the following:

- 1. Black and brown smears on the wall in the Girls Restroom, located beside of the Preschool Room.
- 2. Brown smears on the wall in the Boys Restroom, located beside of the Preschool Room.

Therefore, the premises was not kept clean.

625 - 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, the surveyor discovered a ceiling vent cover was missing, which left an open hole in the ceiling that was approximately six (6) to eight (8) inches in diameter in the School Age One Room; therefore, the ceiling was not in good repair.

Staff stated they would have the vent cover reinstalled.

Hygienic Practices	In Compliance
First Aid/Medication	In Compliance
Outdoor Play Area	In Compliance
Equipment	In Compliance
Transportation	Not Applicable
Kitchen Requirements	In Compliance
Food Service	In Compliance
eal Planning/Center Provides Meals	In Compliance
lanning/Center Does Not Provide Meals	In Compliance



Meal Pla

Not In Compliance

#### Inspection Report

### Children's Records

Not In Compliance

1245 - Immunization Not In Compliance

922 KAR 2:090. Section 9. 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, the surveyor found the following:

- 1. A child's (DOE: 8/1/19) immunization certificate was no longer current after 9/7/21.
- 2. A child's (DOE: 5/19/21) immunization certificate was no longer current as of 7/27/21.

Therefore, the child-care center failed to maintain a current immunization certificate for the children.

**Written Documentation** 

**Not In Compliance** 

1260 - 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 and 42 U.S.C. 9858c(c)(2)(U).

## Findings:

General: Based on review of documentation, the surveyor found that the Emergency Preparedness Plan was dated 1/9/20; therefore, the surveyor was unable to verify if the plan had been reviewed and/or revised within the past year. Staff stated the plan was not submitted to local emergency management by 12/31/21; however, staff had attempted to contact local emergency management and was advised that they could not bring the plan into the office due to COVID. Staff stated in the future they would update the date each year when the plan is reviewed. Staff also stated they would document if there were any problems submitting the plan to local emergency management.

# 1280 - 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 discovered the personnel file for three (3) staff (DOH: 10/25/21, 8/6/21 & 10/18/21) did not contain a written annual professional development plan.

Therefore, the surveyor was unable to determine if annual professional development plans were completed as required.

### **Posted Documentation**

**Not In Compliance** 

# 1310 - Posting Requirements

**Not In Compliance** 

922 KAR 2:090. Section 8. General.

- (6) 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) The provider's preliminary or regular license;
- (b) Each statement of deficiency and civil penalty notice issued by the cabinet during the current licensure year;
- (c) Each plan of correction submitted by the child-care center to the cabinet during the current licensure year;
- (d) Information on the Kentucky Consumer Product Safety Program and the program's Web site as specified in KRS 199.897;
- (e) 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;
- (f) Minimum staff-to-child ratios and group size established in 922 KAR 2:120; and
- (g) Daily planned program.

## Findings:

General: Based on review of documentation, the surveyor found that the daily planned program posted in each of the classrooms was dated 1/17/22-1/21/22; therefore, the daily planned program was not current. Staff stated that they must have forgotten to post the new daily planned program.

Animals

Title

In Compliance

