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GOVERNOR

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Inspection Report

Provider Information		
Provider Name: Smart Start Early Learning Academy	Provider Type: LICENSED TYPE I	CLR No: L383861
Provider Address: 2801 Us Highway 25e, Suite 100, Middlesboro, KY, 40965		Capacity: 79
Owner(s): Smart Start Early Learning Academy, LLC		Director(s): Rudd, Taylor Leigh

Inspection Information		
Inspection Type: Renewal Application		Inspection No: 318684
Date Initiated: 01/27/2022 9:50 AM	Date Concluded: 01/27/2022 1:45 PM	
No. of Children Present: 62		

5 - Background check/left alone/dismissed/relocated

Not In Compliance

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: 12/27/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service, a Criminal Records Check (CRC), or a Child Abuse/Neglect Check (CAN). Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check; therefore, the staff person was hired prior to clearance for employment. The paperwork was found in the staff persons file but had not been submitted. During interview, staff-in-charge stated that the staff person had not worked alone with children and would submit their paperwork. The surveyor did not observe the staff person working alone with children.

2. A staff (DOH: 01/03/22) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service, a Criminal Records Check (CRC), or a Child Abuse/Neglect Check (CAN). Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check; therefore, the staff person was hired prior to clearance for employment. Completed forms for CAN and CRC were filled out by the staff person and was found in the staff persons file but had not been submitted. During interview, staff-in-charge stated that the staff person had not worked alone with children and would submit their paperwork. The surveyor did not observe the staff person working alone with children.

3. A staff (DOH: 08/24/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service prior to hire date. The staff persons file contained an out of state Tennessee Child Abuse/Neglect Check (CAN) that was dated 8/23/21. Based on review of the Kentucky National Background Check Service, the staff member's background check was dated 09/24/21; therefore, the staff person was hired prior to clearance for employment.

4. A staff (DOH: 09/10/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service prior to hire date. Based on review of the Kentucky National Background Check Service, the staff member's background check was dated 09/27/21; therefore, the staff person was hired prior to clearance for employment.

5. A staff (DOH: 05/26/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service prior to hire date. The staff member's background check was dated 06/22/21; therefore, the staff person was hired prior to clearance for employment.

6. A staff (DOH: 08/02/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service prior to hire date. Based on review of the Kentucky National Background Check Service, the staff member's background check was dated 08/16/21; therefore, the staff person was hired prior to clearance for employment.

7. A staff (DOH: 12/16/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service prior to hire date. Staff person had a Tennessee Child Abuse/Neglect Check (CAN) completed on 12/16/21. Based on review of the Kentucky National Background Check Service, the staff member's background check was dated 12/23/21; therefore, the staff person was hired prior to clearance for employment.

8. 5. A staff (DOH: 05/26/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service prior to hire date. The staff member's background check was dated 06/22/21; therefore, the staff person was hired prior to clearance for employment.

20 - Out of state background checks

Not In Compliance

922 KAR 2:280. Section 5. Checks of Other States.

(1) In accordance with 45 C.F.R. 98.43(b)(3), a prospective child care staff member who resides in or has resided in another state within the last five (5) years shall:

(a) Request from each state of current or prior residency, in accordance with the state's laws, policies, and procedures, with a courtesy notice to the cabinet:

1. An in-state criminal records check by:

a. Means of fingerprints for the state of residence; or

b. Any means accepted by a state of prior residency;

2. A check of the state's sex offender registry or repository; and

3. A check of the state-based child abuse and neglect registry and database; and

(b) Direct results of the checks required in paragraph (a) of this subsection to the Department for Community Based Services, Division of Child Care, 275 East Main Street, 3C-F, Frankfort, Kentucky 40601.

Findings:

General: Based on review of documentation,

1. A staff's (DOH: 08/04/21) members file did not contain a completed or submitted out of state background check. Based on review of documentation, the staff member's file contained a Child/Neglect Background Check (CAN) that stated she lived in the state Virginia; The staff member's file did not contain documentation of an Out-of-State Child Abuse/Neglect Check (CAN) or Criminal Records Check (CRC) for Virginia. The surveyor did no observe the staff person working alone with children.

2. A staff's (DOH: 08/24/21) file did not contain an out of state Criminal Records Check (CRC). Based on review of documentation, the staff member's file contained a completed Kentucky Child Abuse/Neglect Check (CAN) and a Kentucky Criminal Records Check (CRC) that stated that she lived in Tennessee. The surveyor did not observe the staff person to work alone with children.

3. A staff's (DOH: 05/26/21) file did not contain an out of state Criminal Records Check (CRC). Based on review of documentation, the staff member's file contained a completed Kentucky Child Abuse/Neglect Check (CAN) and a Kentucky Criminal Records Check (CRC) that stated that she lived in Tennessee. The surveyor did not observe the staff person to work alone with children.

Inspection Report	
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	Not 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.	
Findings: General: Based on observations, the surveyor found the following: <ol style="list-style-type: none"> 1. An unsecure black refrigerator that had been placed on top of a brown shelf in the Book Worms Classroom. 2. An unsecure purple easel leaned up against the back wall located in the Book Worms Classroom. During the inspection, the staff stated that cots would be placed near the easel during rest time for children. 3. An unsecured black refrigerator that had been placed on top of a tunnel shelf in the Wiggle Worms Classroom. 4. An unlocked cabinet underneath the sink in the Caterpillars Classroom that contained a bottle of Hand Sanitizer that stated on the back label, "Keep Out of Reach of Children." The surveyor observed that it was within reach of children during the inspection. 	
Director Requirements	Not In Compliance
360 - Staff Evaluation	Not In Compliance
922 KAR 2:090. Section 10. Director Requirements and Responsibilities. (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: <ol style="list-style-type: none"> 1. A staff's (DOH: 02/01/19) file contained an annual written performance evaluation dated for 11/30/20. 2. A staff's (DOH: 08/28/18) file contained an annual written performance evaluation dated for 11/30/20. 3. A staff's (DOH: 11/03/20) file contained an annual written performance evaluation dated for 01/11/21. 4. A staff's (DOH: 08/14/18) file contained an annual written performance evaluation dated for 10/05/20. 5. A staff's (DOH: 12/06/18) file contained an annual written performance evaluation dated for 03/17/20. 6. A staff's (DOH: 12/18/18) file contained an annual written performance evaluation dated for 01/11/21. Based on the dates of the completed evaluations, the surveyor was unable to determine if the staff evaluations were completed annually.	
Employee Records	Not In Compliance
400 - Educational Requirements	Not In Compliance
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 a: <ol style="list-style-type: none"> 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, the surveyor found a staff's (DOH: 01/13/20) file did not contain verification of a High School Diploma, GED or Commonwealth Child Care Credential. Staff-in-charge reported that she knew the documentation was missing from the file and that the staff person would be sending a copy of their high school transcript later that day.	

405 - 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, the surveyor found the following:

1. A staff's (DOH: 09/9/21) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis.
2. A staff's (DOH: 08/20/18) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis. During interview, staff-in-charge stated that staff person was scheduled for a TB skin test.
3. A staff's (DOH: 08/28/18) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis. During interview, staff-in-charge stated that staff person was scheduled for a TB skin test.
4. A staff's (DOH: 12/18/18) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis.
5. A staff's (DOH: 12/27/21) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis.
6. A staff's (DOH: 08/02/21) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the staff person was free from active tuberculosis.

410 - CPR/First Aid Coverage

Not In Compliance

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

(3) For a child-care center licensed for infant, toddler, or preschool-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills:

- (a) Infant and child cardiopulmonary resuscitation; and**
- (b) Infant and child first aid.**

(4) For a child-care center licensed for school-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills:

- (a) Adult cardiopulmonary resuscitation; and**
- (b) First aid.**

(5) Cardiopulmonary resuscitation (CPR) and first aid training shall be in addition to the fifteen (15) clock hours requirement in subsection (16) of this section.

Findings:

General: Based on review of documentation, the surveyor found that two (2) of the childcare centers staff possessed currently certification in CPR/First Aid. Based on the staff schedule, the surveyor found that the childcare center does not have enough staff certified in CPR/First Aid. The childcare center had two (2) staff listed on the schedule that are Certified in CPR/First Aid; however, their scheduled times did not reflect all hours of operation.

During interview, staff-in-charge stated that approximately 10 staff persons had completed the course but had not received their paper copies of their certifications.

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 ½) 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 ECE-TRIS, the surveyor found the following:

1. Staff (DOH: 08/24/21) has not completed the six (6) hours of cabinet approved orientation; therefore, the training was not completed within the first three (3) months of employment.
2. Staff (DOH: 09/10/21) has not completed the six (6) hours of cabinet approved orientation; therefore, the training was not completed within the first three (3) months of employment.
3. Staff (DOH: 08/04/21) has not completed the six (6) hours of cabinet approved orientation; therefore, the training was not completed within the first three (3) months of employment.
4. Staff (DOH: 08/02/21) has not completed the six (6) hours of cabinet approved orientation; therefore, the training was not completed within the first three (3) months of employment.
5. Staff (DOH: 09/27/21) has not completed the six (6) hours of cabinet approved orientation; therefore, the training was not completed within the first three (3) months of employment.

**Programming
Premises**

**In Compliance
Not In Compliance**

922 KAR 2:120. Section 3. General Requirements.

(7) The following shall be inaccessible to a child in care:
(a) Toxic cleaning supplies, poisons, and insecticides;
(b) Matches, cigarettes, lighters, and flammable liquids; and
(c) Personal belongings and medications of staff.

Findings:

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

1. In the Book Worms Classroom, there was an unlocked brown cabinet that contained a staff person's purse. During interview, the staff confirmed that the purse belonged to her and that she moved her purse to a locked cabinet.
2. In the Wiggle Worms Classroom, an unlocked white cabinet was located near the changing table that contained the following: A bottle of Mild & Mildew Spray that stated, "Keep Out of the Reach of Children" and a set of keys that belonged to a staff person. Both items were located on the second shelf from the bottom and were within reach of children.
3. In the Gross Motor Room, on top of a tan cabinet, there was a canister of Sanitizing Wipes that the back label stated, "Keep Out of the Reach of Children." During the inspection, the surveyor observed the Sanitizing Wipes to be within reach of the children in the room.
4. In the Glow Worms Classroom, there was one (1) bottle of Disinfectant Sanitizer that was placed on a wire shelf beside the sink. The label on the sanitizer stated, "Keep Out of the Reach of Children" on the back label.
5. A bucket of Sanitizing Wipes located in the hallway between the Butterflies Classroom and Barnyard Classroom that stated on the label, "Keep Out of Reach of Children."
6. An unlocked cabinet located underneath the sink in the Caterpillars Classroom contained a spray bottle of disinfectant that stated on the back label, "Keep Out of the Reach of Children." During the inspection, the disinfectant was observed to be within reach of children.

The items mentioned were observed to be accessible to children.

585 - 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 following:

1. An ABC rug in the Wiggle Worms Classroom contained pieces of paper; therefore, the rug was not kept clean.
2. A blue pillow in the Wiggle Worms Classroom contained stains; therefore, the pillow was not kept clean.
3. A blue square rug and two (2) round blue rugs in the Butterflies Classroom contained pieces of paper; therefore, the rugs were not kept clean.
4. A large colorful rug with hands in the Book Worms Classroom contained pieces of paper; therefore, the rug was not kept clean.
5. A dust pan located in the restroom in the Book Worms Classroom was dusty & appeared to have items swept into it and not thrown away; therefore, the dust pan was not kept clean.
6. A large vent on the back wall of the Book Worms Classroom contained dust; therefore, the vent was not kept clean.
7. One (1) sink in the Caterpillars Classroom that did not appear to drain properly while checking the water temperature; therefore, the sink was not kept in good repair.

Hygienic Practices

Not In Compliance

730 - Diaper Changing Area/Surface

Not In Compliance

922 KAR 2:120. Section 12. 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.

Findings:

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

1. In the Wiggle Worms Classroom, there was debris underneath the diaper changing pad on the diaper changing table; therefore, the diaper changing surface was not kept clean.
2. In the Caterpillars Classroom, there was debris underneath the diaper changing pad on the diaper changing table; therefore, the diaper changing surface was not kept clean.
3. In the Book Worms Classroom, there was debris underneath the diaper changing pad on the diaper changing table; therefore, the diaper changing surface was not kept clean.

Inspection Report**First Aid/Medication****Not In Compliance****775 - Medication****Not In Compliance****922 KAR 2:120. Section 7. First Aid and Medicine.****(6) Medication, including refrigerated medication, shall be:****(a) Stored in a separate and locked place, out of the reach of a child unless the medication is:**

- 1. A first aid supply and is maintained in accordance with subsection (1) of this section;**
- 2. Diaper cream, sunscreen, or toothpaste. Diaper cream, sunscreen, or toothpaste shall be inaccessible to a child;**
- 3. An epinephrine auto-injector. A licensed child-care center shall comply with KRS 199.8951 and 311.646, including:**

- a. An epinephrine auto-injector shall be inaccessible to a child;**
- b. A child-care center shall have at least one (1) person onsite who has received training on the administration of an epinephrine auto-injector if the child-care center maintains an epinephrine auto-injector;**
- c. A child-care center shall seek emergency medical care for a child if an auto-injector is administered to the child; and**
- d. A child-care center shall report to the child's parent and the cabinet in accordance with 922 KAR 2:090, Section 13(1)(b) if an epinephrine auto-injector is administered to a child; or**

4. An emergency or rescue medication for a child in care, such as medication to respond to diabetic or asthmatic condition, as prescribed by the child's physician. Emergency or rescue medication shall be inaccessible to a child in care;

(b) Kept in the original bottle; and**(c) Properly labeled.****(7) Medication shall not be given to a child if the medication's expiration date has passed.****Findings:**

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

1. A white cabinet that was located in the Wiggle Worms Classroom near the changing table was unlocked and contained the following: One (1) bottle of Desitin Cream, one (1) bottle of Vitamin A & D Ointment, one (1) can of spray Coppertone Sunscreen, one (1) bottle of Babyganics Sunscreen.

2. A white cabinet that was located in the Wiggle Worms Classroom near the changing table was unlocked and contained the following: one (1) bottle of Equate Ibuprofen that appeared to belong to a child and one (1) bottle of Aquaphor Lotion.

Each of these items stated on the back label, "Keep Out of the Reach of Children." These items appeared to be within reach of children by the surveyor.

Outdoor Play Area**Not In Compliance****795 - Playground Conditions****Not In Compliance****922 KAR 2:120. Section 4. Premises Requirements.****(20) An outdoor play area shall be:**

- (d) Safe from foreseeable hazard;**
- (e) Well drained;**
- (f) Well maintained;**
- (g) In good repair; and**
- (h) Visible to staff at all times.**

Findings:

General: Based on observation of the outdoor playground, the surveyor found the following:

1. Black padding located beside the large play structure and blue slide was separated; therefore, this created a tripping hazard.

2. A wooden post attached to a set of steps, leading up to a wooden play structure had one (1) nail protruding out of a wooden post.

3. A wooden ramp, leading up to the wooden play structure had two (2) nails protruding out of a wooden post, beside the blue slide.

4. There was a blue rope that contained a clip on the end, attached to a tree outside of the play area that was observed to hang over the fence into the play area where it was within reach of children.

The items mentioned above presents a foreseeable hazard to the children.

805 - Fence Construction**Not In Compliance****922 KAR 2:120. Section 4. Premises Requirements.****(24) Fences shall be:**

- (a) Constructed of safe material;**
- (b) Stable; and**
- (c) In good condition.**

Findings:

General: Based on observation of the playground, the surveyor found a brown post located near the white fence that was unsecure.

Inspection Report	
Equipment	Not In Compliance
865 - Indoor/Outdoor Equipment	Not In Compliance
922 KAR 2:120. Section 13. Toys and Furnishings. (2) Indoor and outdoor equipment shall: (a) Be clean, safe, and in good repair; (b) Meet the physical, developmental needs, and interests of children of different age groups; (c) Be free from sharp points or corners, splinters, protruding nails or bolts, loose or rusty parts, hazardous small parts, lead-based paint, poisonous material, and flaking or chalking paint; and (d) Be designed to guard against entrapment or situations that may cause strangulation.	
Findings: General: Based on observation of the outdoor playground, the surveyor found the following: One (1) blue and yellow Little Tykes car that contained broken plastic and exposed a jagged edge on the front of the car.	
Transportation	In Compliance
Kitchen Requirements	In Compliance
Food Service	In Compliance
Meal Planning/Center Provides Meals	In Compliance
Meal Planning/Center Does Not Provide Meals	In Compliance
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: 08/03/21) file contained an immunization certificate that was no longer current as of 08/28/21; therefore, the surveyor was unable to determine that the immunization certificate was current. 2. A child's (DOE: 05/03/21) file contained an immunization certificate that was no longer current as of 11/12/21; therefore, the surveyor was unable to determine that the immunization certificate was current.	
Written Documentation	Not In Compliance
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 found the following: 1. A staff's (DOH: 02/01/19) file contained a professional development plan dated for 11/30/20. 2. A staff's (DOH: 08/28/18) file contained a professional development plan dated for 11/30/20. 3. A staff's (DOH:12/06/18) file contained a professional development plan dated for 02/03/19. 4. A staff's (DOH: 11/03/20) file contained a professional development plan dated for 01/11/21. 5. A staff's (DOH:12/18/18) file contained a professional development plan dated for 01/11/21. 6. A staff's (DOH:08/14/18) file contained a professional development plan dated for 10/05/20. Based on the dates of the completed Professional Development Plans, the surveyor was unable to determine if the Professional Development Plans were completed annually.	
Posted Documentation	In Compliance
Animals	In Compliance

Signature of Provider/Representative

Title

Date