Andy Beshear

GOVERNOR



KID013A v2.0

CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

Melissa A. Moore, Director

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Adam Mather INSPECTOR GENERAL

Inspection Report

	Inspection Report		
	Provider Information		
Provider Name: St. Mary School	Provider Type: LICENSED TYPE I	CLR No: L383894	
Provider Address: 1121 Main Street, Paris, KY, 40361 C		Capacity: 60	
Owner(s): Sts. Peter & Paul Regional Catholic School		Director(s): Bezeau, Tiffany	
	Inspection Information		
Inspection Type: Renewal Application		Inspection No: 319972	
Date Initiated: 01/24/2022 10:09 AM	Date Concluded: 01/24/2022 12:33 PM		
	No. of Children Present: 12		
	Inspection Report		
	Background Checks	In Compliance	
	Supervision	In Compliance	
	Staffing Requirements	In Compliance	
	General Administration	Not In Compliance	
25 - 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 (b) Protect and assure the health, safety, and comformation of the section of the s	• • • •	922 KAR 2:120, and 922 KAR 2:280; and	
Findings:			
	is not met. The hall bathroom on the main floor contained a toile and a plunger that were stored next to the toilet. This manner o		
	Director Requirements	Not In Compliance	
		Not In Compliance	

(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, this regulatory requirement was not met. A substitute staff hired on 12/10/2018, did not have a current evaluation on file.



Inspection Report

Employee Records

405 - TB Verification

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, this regulatory requirement was not met. The following was found:

1. A substitute staff hired on 12/10/2018, did not have current negative TB documentation on file. The TB skin test on file was dated 12/08/2018 and is valid for two years.

2. A staff hired on 6/01/2021, did not have any TB documentation on file.

3. A staff hired on 8/26/2021, did not have any TB documentation on file.

435 - Training

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 $\frac{1}{2}$) 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 documentation, this regulatory requirement was not met. The following was found:

1. A staff member hired on 10/23/2018, only completed 10.75 of the fifteen hours of cabinet-approved early care and education training hours between 7/01/2020 and 6/30/2021.

2. A substitute staff member hired on 12/10/2018, only completed 1 of the fifteen hours of cabinet-approved early care and education training hours between 7/01/2020 and 6/30/2021.

The ECE-TRIS system was reviewed and confirmed these findings.

922 KAR 2:120. Section 4. Premises Requirements. (5) The building shall be constructed to ensure the: (a) Building is: 1. Dry; 2. Ventilated; and 3. Well lif, including clean light fixtures that are: a. In good repair in all areas; and b. Shielded or have shatter-proof bulbs installed; and (b) Following are protected: 1. Windows; 2. Doors; 3. Stoves; 4. Heaters; 5. Furnaces; 6. Pipes; and 7. Stairs. Findings: General: Based on observation, this regulatory requirement was not met. Three sets of light bulbs (in the ceiling) were uncovered in the bathroom located in the basement. These light bulbs were not shatter-proof.		Programming	In Compliance			
922 KAR 2:120. Section 4. Premises Requirements. (5) The building shall be constructed to ensure the: (a) Building is: 1. Dry; 2. Ventilated; and 3. Well lit, including clean light fixtures that are: a. In good repair in all areas; and b. Shielded or have shatter-proof bulbs installed; and (b) Following are protected: 1. Windows; 2. Doors; 3. Stoves; 4. Heaters; 5. Furnaces; 6. Pipes; and 7. Stairs. Findings: General: Based on observation, this regulatory requirement was not met. Three sets of light bulbs (in the ceiling) were uncovered in the basement. These light bulbs were not shatter-proof. 625 - Floors, Walls, Ceilings Not In Compliance 522 KAR 2:120. Section 4. Premises Requirements. Not In Compliance 522 KAR 2:120. Section 4. Premises Requirements. Pioers, walls, and ceilings shall be smooth, in good repair, and constructed to be easily cleaned. Findings: General: Based on observation, this regulatory requirement was not met. A wall in the basement bathroom contained two areas of chipped paint. Findings: In Compliance First Aid/Medication In Compliance		Premises	Not In Compliance			
(5) The building shall be constructed to ensure the: (a) Building is: 1. Dry; 2. Ventilated; and 3. Well lit, including clean light fixtures that are: a. In good repair in all areas; and b. Shielded or have shatter-proof builbs installed; and (b) Following are protected: 1. Windows; 2. Doors; 3. Stores; 4. Heaters; 5. Furnaces; 6. Pipes; and 7. Stairs. Findings: General: Based on observation, this regulatory requirement was not met. Three sets of light builbs (in the ceiling) were uncovered in the basement. These light builbs were not shatter-proof. 525 - Floors, Walls, Ceilings 625 - Floors, walls, and ceilings shall be smooth, in good repair, and constructed to be easily cleaned. (9) Floors, walls, and ceilings shall be smooth, in good repair, and constructed to be easily cleaned. Findings: General: Based on observation, this regulatory requirement was not met. A wall in the basement bathroom contained two areas of chipped paint. Energy: Based on observation, this regulatory requirement was not met. A wall in the basement bathroom contained two areas of chipped paint.	605 - Building Requirements		Not In Compliance			
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·····		Hygienic Practices	In Compliance			
		First Aid/Medication	In Compliance			

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CABINET FOR HEALTH

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Not In Compliance

Not In Compliance

-	on Report	
Outdoo	or Play Area	In Complian
Equ	uipment	In Complian
Trans	sportation	Not Applicat
Kitchen I	Requirements	In Complian
Food	l Service	In Complian
Meal Planning/Co	enter Provides Meals	In Complian
Meal Planning/Cente	r Does Not Provide Meals	In Complian
Childre	n's Records	Not In Complian
50 - Enrollment Information		Not In Complian
 b. Contact information to enable a person in charge to contact the chil (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 d. The child's general health status and medical history including, if application of the status and medical history including. 	• child;	
 (i) Allergies; (ii) Restriction on the child's participation in activities with specific in (iii) Permission from the parent for third-party professional services in e. The name and phone number of each person to be contacted in an e f. Authorization by the parent for the child-care center to seek emerged 	the child-care center; mergency involving or impacting the child;	·
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Findings:

General: Based on review of documentation, this regulatory requirement was not met. A substitute staff member hired on 12/10/2018, did not have a current professional development plan on file.

Posted Documentation	In Compliance
Animals	In Compliance

