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GOVERNOR

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Inspection Report

Provider Name: St. Catharine College Head Start	Provider Information	CLR No: L357718
Provider Address: 100 Callahan Drive, St. Catharine, KY, 40061	Provider Type: LICENSED TYPE I	Capacity: 41
Owner(s): Central Kentucky Community Action Council, Inc.		Director(s): Smith, Pamela Anne

Inspection Type: Investigation	Inspection Information	Inspection No: 246604
Date Initiated: 09/12/2018 10:05 AM	Date Concluded: 09/12/2018 10:35 AM	
	No. of Children Present: 27	

Inspection Report	
General Administration	In Compliance
Director Requirements	Not In Compliance
350 - Health, Safety, Comfort	Not In Compliance
922 KAR 2:090. Section 10. Director Requirements and Responsibilities. (1) A director shall: (l) Assure the health, safety, and comfort of each child;	
Findings:	
General: Based on Interview, a four-year-old child, who has gastrointestinal issues, was kicked in the stomach by another child. The parent was not notified by phone about the incident but instead heard about it from her friend who had picked up the four-year-old from the facility. The child ended up going to the hospital with a bruise and a knot on her stomach.	
Employee Records	In Compliance
Written Documentation	Not In Compliance
1185 - Confidentiality/Maintenance/Access	Not In Compliance
922 KAR 2:090. Section 9. Records. (2) A child-care center shall: (a) Maintain the confidentiality of a child's record and information concerning a child or the child's parent; (b) Maintain all records for five (5) years; and (c) Provide the cabinet access and information in the completion of the investigation pursuant to KRS 620.030(4) and (5).	
Findings:	
General: Based on Interview, a four-year-old child was kicked in the stomach by another child in the classroom. At pick up time, the teacher told the person picking up the four-year-old child the name of the child that kicked the four-year-old in the stomach and of the behavioral issues the facility was having with that child. The confidentiality of that child was not maintained.	

Signature of Provider/Representative

Title

Date