



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Adam Mather
INSPECTOR GENERAL

Inspection Report

Provider Name: Mosaic United Methodist Church Child Development Center	Provider Information Provider Type: LICENSED TYPE I	CLR No: L353761
Provider Address: 8008 St. Andrews Church Road, Louisville, KY, 40258		Capacity: 150
Owner(s): Mosaic United Methodist Church, Inc.		Director(s): Perryman, Theresa Elaine

Inspection Type: Renewal Application	Inspection Information	Inspection No: 244656
Date Initiated: 06/14/2018 9:30 AM	Date Concluded: 06/14/2018 1:00 PM	
	No. of Children Present: 54	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	In Compliance
Employee Records	Not In Compliance
410 - 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 within the first three (3) months of employment;
 - (b) Nine (9) hours of cabinet-approved early care and education training within the first year of employment, 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 during each subsequent year of employment, including one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training completed once every five (5) years.

Findings:

General: Based on review of documentation and interview, the child care center failed to maintain employee records in accordance with regulations. Review of staff files and ECE-TRIS reports revealed documentation of fifteen (15) hours of cabinet-approved training during each subsequent year of employment was not presented for review at the time of survey for a staff member with a hire date of 1/30/17. In addition, documentation of the completion of pediatric abusive head trauma (PAHT) training within the first year of employment, including once every five (5) years thereafter, was not presented for review at the time of survey for three (3) staff members with the following hire dates: 10/7/96, 2/14/11 and 8/6/12. Furthermore, the director acknowledged that a staff member with a hire date of 1/30/17 did not complete the required annual training hours as well as acknowledged that three (3) staff members with the following hire dates: 10/7/96, 2/14/11 and 8/6/12 did not have the required PAHT training completed once every five (5) years.

Programming	In Compliance
Premises	In Compliance
Hygienic Practices	In Compliance
First Aid/Medication	In Compliance
Outdoor Play Area	In Compliance
Equipment	In Compliance
Transportation	In Compliance

Inspection Report		
	Food Service/Food Program	In Compliance
	Food Service	In Compliance
	Children's Records	In Compliance
	Written Documentation	In Compliance
	Posted Documentation	In Compliance
	Animals	In Compliance

Signature of Provider/Representative

Title

Date