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Inspection Report

Provider Name: Central Christian Child Care Center	Provider Information	CLR No: L353960
Provider Address: 105 Spruce Street, Suite 125, Lexington, KY, 40507	Provider Type: LICENSED TYPE I	Capacity: 122
Owner(s): Central Christian Child Development Center		Director(s): Sanders, Demethra

Inspection Type: Renewal Application	Inspection Information	Inspection No: 320527
Date Initiated: 05/09/2022 7:41 AM	Date Concluded: 05/09/2022 11:35 AM	
	No. of Children Present: 45	

Inspection Report

Background Checks

Not In Compliance

10 - Submit background check

Not In Compliance

922 KAR 2:280 - Section 4. Procedures and Payments.

- (1) To initiate the process for obtaining background checks on a prospective child care staff member, the child care provider shall:**
 - (a) Request that the prospective child care staff member provide a copy of his or her driver's license or other government-issued photo identification and verify that the photograph clearly matches the prospective child care staff member;**
 - (b) Request that the prospective child care staff member complete and sign the:**
 - 1. DCC-500, Applicant Child Care Staff Member Waiver Agreement and Statement; and**
 - 2. DCC-501, Disclosures to Be Provided to and Signed by the Applicant Child Care Staff Member; and**
 - (c) Log on to the NBCP portal and enter the prospective child care staff member's demographic information for a check of the:**
 - 1. Child abuse and neglect central registry pursuant to 922 KAR 1:470;**
 - 2. National Crime Information Center's National Sex Offender Registry in accordance with 34 U.S.C. 20921; and**
 - 3. Sex Offender Registry established in accordance with KRS 17.500 through 17.580.**

Findings:

General: Based on review of documentation, observation and interview, this regulatory requirement was not met. One staff person (hire date: 5/5/22) had KARES documentation on file which listed the following as the employee's employment eligibility status: New Application must be Submitted. This staff person was not listed under the facility's name in the KARES database prior to the inspection. The staff person in charge attempted to re-enter the staff person's information in KARES during the visit; however, stated that she was not able to because the staff person's driver's license was expired. This staff person was not observed working alone during the visit.

15 - Submit fingerprints

Not In Compliance

922 KAR 2:280. Section 4. Procedures and Payments.

(4)(a) Upon submission of payment in accordance with subsections (2) and (3) of this section, the child care provider shall print a copy of the DCC-504, Applicant Child Care Staff Member Live Scan Fingerprinting Form, from the NBCP portal and provide the form to the child care staff member.

(b) The child care staff member shall:

- 1. Have no more than ninety (90) calendar days from the date of payment pursuant to subsections (2) and (3) of this section to submit the child care staff member's fingerprints at an authorized collection site for NBCP; and**
- 2. Present the DCC-504 and driver's license or other government-issued photo identification to the designated agent at an authorized collection site prior to fingerprint submission.**

Findings:

General: Based on review of documentation and observation, this regulatory requirement was not met. The surveyor toured the facility with the staff person in charge upon arrival and observed one staff person caring for two children alone in the Jr Tots Classroom (one-to-two-year old's). During the file review, it was found that this staff person was hired on 4/25/22. Her personnel file only contained a packet of background check forms that had been filled out by the staff person and an IdentoGo form. There was no evidence on file that the staff person's fingerprints had been submitted for processing and a review of the Kentucky National Background check service (KARES) supported this finding. The staff person in charge entered the staff person's information in KARES during the visit and provided the surveyor with documentation stating that the staff person's background check was "In Process".

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 and observation, this regulatory requirement was not met. One staff person (hire date: 10/8/21) had a completed fingerprint-based background check in KARES with eligible for hire status; however, did not have evidence or results of an out of state background check from New Jersey and South Carolina. The staff person had listed in her file that she previously lived in these two states within the past five years; therefore, she would need a criminal records check, child abuse/neglect check, and a sexual abuse registry check from these states. This staff person was observed working alone with children in the Preschool Classroom during the inspection.

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 observation, this regulatory requirement was not met. During a tour of the Infant Classroom, the surveyor observed a lamp clipped to a shelf above the diaper changing table. The lamp was plugged into an electrical outlet next to the diaper table and the cord was hanging loose above the area. The cord was accessible to the children.

Director Requirements

Not In Compliance

355 - Staff Meeting

Not In Compliance

922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

(1) A director shall:

- (i) Conduct, manage, and document in writing recurring staff meetings;**

Findings:

General: Based on review of documentation, the surveyor found documentation of only one staff meeting in the previous year.

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, five staff eligible for an annual performance review did not have current documentation of a review on file at the facility. The documentation on file was dated 2018 and 2019.

370 - Caregiver Alone

Not In Compliance

922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

(1) A director shall:

(m) Assure that a person acting as a caregiver of a child in care shall not be left alone with a child, if the licensee has not received the results of the background checks as described in 922 KAR 2:280;

Findings:

General: Based on review of documentation and observation, this regulatory requirement was not met. The following was found:

1. The facility failed to obtain the results of a background check from a previous state of residence for one employee (hire date: 10/8/21) prior to allowing the staff person to work alone with children. A review of this staff person's file during the inspection found New Jersey and South Carolina listed as a previous residence within the past five years. The staff person in charge stated that this was an oversight on her part and indicated that out of state background checks had not been submitted for processing. This staff person was observed caring for seven preschool children alone during the visit.
2. The surveyor toured the facility with the staff person in charge upon arrival and observed one staff person caring for two children in the Jr Tots Classroom (one-tp-two year old's). During the file review, it was found that this staff person was hired on 4/25/22. Her personnel file only contained a packet of background check forms that had been filled out by the staff person and an IdentoGo form. There was no evidence on file that the staff person's fingerprints had been submitted for processing and a review of the Kentucky National Background check service (KARES) supported this finding. The staff person in charge entered the staff person's information in KARES during the visit and provided the surveyor with documentation stating that the staff person's background check was "In Process".

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:

- 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, seven staff (hire dates: 11/8/21, 12/28/21, 11/13/21, 4/15/22, 5/14/21, 5/5/22, and 4/25/22) did not have educational documentation on file.

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

1. One staff file (hire date: 6/11/19) contained results of a negative T.B. test that is no longer current. The test was dated 9/16/19, which exceeds the two year time frame.
2. One staff person (hire date: 4/25/22) did not have T.B. documentation on file.
3. One staff person (hire date: 10/8/21) had TB documentation in her file; however, the documentation did not contain a date. Therefore, the surveyor was not able to determine if it was current.

415 - CPR/First Aid Required Training

Not In Compliance

922 KAR 2:120. Section 7. First Aid and Medicine.

(8) Each center shall ensure that every staff member has received training on first aid and cardiopulmonary resuscitation (CPR).

Findings:

General: Based on review of documentation, 14 staff out of 25 did not have evidence of completing CPR/First Aid training on file at the facility. A review of ECE-TRIS records supports the information found during the survey.

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 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 and the Training Records Information System (TRIS), the following was found:

1. Four staff (hire dates: 5/25/21, 10/8/21, 12/28/21, and 11/13/21) did not complete the required Orientation training. These staff have been employed for more than three months.
2. One staff person hired on 6/11/19, completed PAHT training on 11/24/15; however, did not renew the training due 11/14/20.
3. Three staff (hire dates: 9/17/18, 8/18/17, and 6/11/19) did not complete the required 15 hours of cabinet-approved training hours between 7/1/2020 and 6/30/21.

Programming

In Compliance

Premises

Not In Compliance

565 - Inaccessible Items

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, this regulatory requirement was not met. A container of Clorox Disinfecting wipes were positioned on a low shelf in the gym and was accessible to the children.

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

1. The wall where riding toys are stored in the gym contained numerous areas of chipped paint and small divots.
2. A wall in the dramatic play area in the second Preschool Classroom contained approximately 10-12 small holes. An administrative staff person stated during interview that a shelf had been removed from the wall.
3. The wall above the sink and counter top in the Jr. Tots Classroom had been repaired with dry wall mud; however, the area had not been sanded or painted. The surveyor observed several smaller areas throughout this classroom that had been repaired, but not sanded or painted.
4. The walls in the Busy Bee's Classroom were in disrepair. The surveyor observed excessive chipped paint beside a stack of cots and beside the sensory tables. The wall in the circle time area contained chipped paint and small divots. The wall next to the door used to enter and exit the classroom contained several areas of torn drywall.

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, this regulatory requirement was not met. The diaper changing mat in the Tiny Tots Classroom contained two large tears on the top surface. Therefore, it could no longer be properly cleaned and sanitized.

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, this regulatory requirement was not met. A container positioned on a shelf next to the diaper changing table in the Crawler's Classroom contained a bottle of Aquaphor Healing Ointment that was not labeled with a child's name.

Outdoor Play Area

Not In Compliance

800 - Protective Surface

Not In Compliance

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

(21) A protective surface shall:

- (a) Be provided for outdoor play equipment used to:
 - 1. Climb;
 - 2. Swing; and
 - 3. Slide; and
- (b) Have a fall zone equal to the height of the equipment.

Findings:

General: Based on observation, this regulatory requirement was not met. The surveyor observed two small plastic slides positioned on top of blacktop on the toddler playground. One of the slides had a thin outdoor sheet underneath it; however, there was no protective surfacing material underneath the slides.

Equipment

Not In Compliance

860 - Toys/Furniture

Not In Compliance

922 KAR 2:120. Section 13. Toys and Furnishings.

(1) All toys and furniture contacted by a child shall be:

- (a) Kept clean and in good repair; and
- (b) Free of peeling, flaking, or chalking paint.

Findings:

Based on observation, this regulatory requirement was not met. The Busy Bee's Classroom contained a bean bag with a large tear in the vinyl cover and a mirror hanging on the wall with excessive smudges and grime smeared on the surface.

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

- 1. The crock pot used to warm infant bottles in the Crawlers Classroom contained a dark ring of film on the inside.
- 2. A face plate on an electrical outlet in the Preschool Classroom was broken and contained sharp edges.
- 3. A face plate on an electrical outlet in a second Preschool Classroom was broken. Two pieces of Duct tape had been placed over the outlet in an attempt to secure it to the wall and a large pillow had been placed in front of the area.
- 4. During a tour of the Infant Classroom, the surveyor observed a sign posted on the bathroom door that stated, "Bathroom Sink Broken. Please Wash Hands Infant Room Sink". The surveyor turned the knobs on the sink and found that only a few drops of water comes out of the faucet; therefore, it does not work properly.

Transportation

Not Applicable

Inspection Report

Kitchen Requirements

Not In Compliance

1040 - Refrigerator

Not In Compliance

922 KAR 2:120. Section 8. Kitchen Requirements.

- (4) A cold-storage facility used for storage of perishable food in a nonfrozen state shall:**
 - (a) Have an indicating thermometer or other appropriate temperature measuring device;**
 - (b) Be in a safe environment for preservation; and**
 - (c) Be forty (40) degrees Fahrenheit or below.**

Findings:

General: Based on observation, this regulatory requirement was not met. The following was found:

- 1. The refrigerator used for the storage of yogurt sticks in the Preschool Classroom did not have an indicating thermometer.
- 2. The refrigerator used for the storage of a child's milk in the Jr. Tots Classroom did not have an indicating thermometer.

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, one child (enrollment date: 8/9/21) had an immunization certificate on file that was no longer current as of 9/26/21.

1250 - Enrollment Information

Not In Compliance

922 KAR 2:090. Section 9. Records.

- (1) A child-care center shall maintain:**
 - (b) A written record for each child:**
 - 1. Completed and signed by the child's parent;**
 - 2. Retained on file on the first day the child attends the child-care center; and**
 - 3. To contain:**
 - a. Identifying information about the child, which includes, at a minimum, the child's name, address, and date of birth;**
 - b. Contact information to enable a person in charge to contact the child's:**
 - (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 child;**
 - d. The child's general health status and medical history including, if applicable:**
 - (i) Allergies;**
 - (ii) Restriction on the child's participation in activities with specific instructions from the child's parent or health professional; and**
 - (iii) Permission from the parent for third-party professional services in the child-care center;**
 - e. The name and phone number of each person to be contacted in an emergency involving or impacting the child;**
 - f. Authorization by the parent for the child-care center to seek emergency medical care for the child in the parent's absence;**

Findings:

General: Based on review of documentation, two children's files did not contain the name and phone number of the child's physician (enrollment dates: 1/3/22 and 8/9/21).

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, four staff (hire dates: 2/18/21, 9/14/20, 8/1/00, and 6/11/19) did not have evidence of a staff professional development plan on file at the facility.

Inspection Report

1285 - Earthquake/Tornado/Fire Drills

Not In Compliance

922 KAR 2:090. Section 9. Records.

(1) A child-care center shall maintain:

(h) A written record of quarterly practiced earthquake drills and tornado drills detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3;

(i) A written record of practiced fire drills conducted monthly detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3;

Findings:

General: Based on review of documentation, this regulatory requirement was not met. At the time of the survey it was found that there was no record of quarterly earthquake and tornado drills conducted at the facility.

1305 - Fire Drills

Not In Compliance

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

(12) A fire drill shall be:

- (a) Conducted during hours of operation at least monthly; and
- (b) Documented.

(13) An earthquake drill, shelter-in-place or lockdown drill, and tornado drill shall be:

- (a) Conducted during hours of operation at least quarterly; and
- (b) Documented.

Findings:

General: Based on review of documentation, this regulatory requirement was not met. At the time of the survey it was found that there was no record of lockdown drills conducted at the facility.

Posted Documentation

In Compliance

Animals

In Compliance

Signature of Provider/Representative

Title

Date