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Inspection Report

Provider Name: E's Busy Bee's Day Care	Provider Information	CLR No: L357848
Provider Address: 24 Allen Drive, Stanton, KY, 40380	Provider Type: LICENSED TYPE I	Capacity: 19
Owner(s): Dotson, Evalene Stewart		Director(s): Dotson, Evalene Stewart

Inspection Type: Renewal Application	Inspection Information	Inspection No: 217417
Date Initiated: 10/10/2016 10:24 AM	Date Concluded: 10/10/2016 12:35 PM	
	No. of Children Present: 10	

Inspection Report	
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	Not In Compliance

265 - Health, Safety, Comfort **Not In Compliance**

922 KAR 2:110. Section 4. Director Requirements and Responsibilities.
(1) Effective with the adoption of this administrative regulation, a director shall:
(l) Provide for the health, safety, and comfort of each child;

Findings:

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

- Two (2) unprotected electrical outlets in the restroom behind the papertowel holder. Upon interview, staff acknowledged that the outlets should be covered.
- A five (5) gallon bucket half full of liquid was sitting in the floor of Classroom 1 next to the gate leading into the kitchen. The bucket and contents were accessible to the children presenting a safety hazard. The Director reported that the liquid was cleaning water that she had intended to empty.

Employee Records **Not In Compliance**

330 - Adequate Substitute(s) **Not In Compliance**

922 KAR 2:110. Section 5. Staff Requirements.
(6) Child-care centers shall have available in case of need:
(a) One (1) qualified substitute staff person for a Type II child-care center; or
(b) Two (2) qualified substitute staff persons for a Type I child-care center.

Findings:

General: Based on review of documentation, review of ECE-Tris, and interview, the surveyor found that one (1) of the two (2) persons identified as substitutes does not meet the staff requirements of this administrative regulation for a Type 1 center based on lack of cabinet-approved early care and education annual training hours. Upon interview, the director reported that the substitute had completed annual training hours; however, documentation was not presented to the surveyor.

335 - Qualified Substitute

Not In Compliance

922 KAR 2:110. Section 5. Staff Requirements.

(7) Each qualified substitute staff person shall:

- (a) Meet the staff requirements of this administrative regulation; and**
- (b) Provide the required documentation to verify compliance with this administrative regulation.**

Findings:

General: Based on review of documentation, review of ECE-Tris, and interview, the surveyor found that one (1) of the two (2) persons identified as substitutes does not meet the staff requirements of this administrative regulation for a Type 1 center based on lack of cabinet-approved early care and education annual training hours. Upon interview, the director reported that the substitute had completed annual training hours; however, documentation was not presented to the surveyor.

340 - Training

Not In Compliance

922 KAR 2:110. Section 5. Staff Requirements.

(14) 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 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 pediatric abusive head trauma training completed once every five (5) years.**

Findings:

General: Based on review of documentation, review of ECE-Tris, and interview, the surveyor found the following:

1. One (1) staff file presented for review (DOH: 03/14/05) contained only two (2) hours of annual training from 03/14/2015 - 03/13/2016. Upon interview, staff reported that they thought they had taken more training; however, training certificates on file showed the additional training was taken after 03/13/16.
2. The surveyor found no verification that a staff (DOH: 11/22/13) had completed Pediatric Abusive Head Trauma Training within the first year of hire or within the past five (5) years as required. Staff reported they had taken the training; however, no documentation of the training was provided to the surveyor.

Programming

In Compliance

Premises

Not In Compliance

460 - Inaccessible Items

Not In Compliance

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

(7) Except in accordance with subsection (8) of this section, the following shall be inaccessible to a child in care:

- (a) Toxic cleaning supplies, poisons, and insecticides;**
- (b) Knives and sharp objects;**
- (c) Matches, cigarettes, lighters, and flammable liquids;**
- (d) Plastic bags;**
- (e) Litter and rubbish;**
- (f) Bar soap; and**
- (g) Personal belongings and medications of staff.**

Findings:

General: Based on observation and interview, the following was found:

1. There was one (1) can of Pepsi that belonged to staff sitting on the table next to the couch in Classroom 1. The Pepsi was accessible to children. Staff confirmed that the Pepsi belonged to them.
2. There was one (1) can of Pantene Hair Spray and one (1) hair brush on the shelf next to the door leading to the garage in Classroom 1. The items were accessible to children. Staff confirmed that the items belonged to them.
3. There was one (1) container of paint stored in the unlocked extra room located off of Classroom 2 that were accessible to children. The door had a lock in place; however, it was not latched. Staff acknowledged that the door should have been latched.
4. There was a five (5) gallon bucket sitting on the floor inside Classroom 1 next to the gate leading to the kitchen which was accessible to children. The bucket contained what appeared to be dirty cleaning water. Staff reported that the bucket did contain cleaning water.
5. There was one (1) loose plastic bag and a bottle of Clorox Bleach sitting on the shelf next to the kitchen gate in Classroom 1. The items were accessible to children. Staff acknowledged that the items should have been locked up.

Hygienic Practices

In Compliance

First Aid/Medication

Not In Compliance

670 - 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;**
 - (b) Kept in the original bottle; and**
 - (c) Properly labeled.**
- (7) Medication shall not be given to a child if the expiration date on the bottle has passed.**

Findings:

General: Based on observation and interview, the surveyor found one (1) container of diaper cream and one (1) container of Vaseline stored in a basket on top of the changing station in Classroom Two (2). The diaper cream and Vaseline were not locked up and would have been accessible to a child having their diaper changed. Upon interview, staff acknowledged that the items should be locked up.

Inspection Report

Outdoor Play Area

In Compliance

Equipment

Not In Compliance

755 - Toys/Equipment/Furniture

Not In Compliance

922 KAR 2:120. Section 11. Toys and Furnishings.

- (1) All toys, equipment, 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:

General: Based on observation and interview, the surveyor found that two (2) tricycles located on the playground were missing one (1) pedal each; therefore, the tricycles were not in good repair. Staff reported that they were aware that the tricycles were missing pedals.

Transportation

Not Applicable

Food Service

Not In Compliance

960 - Bottles

Not In Compliance

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

- (9) Bottles shall be:**
 - (a) Individually labeled;**
 - (b) Promptly refrigerated;**
 - (c) Covered when not in use; and**
 - (d) Consumed within one (1) hour of being heated or removed from the refrigerator.**

Findings:

General: Based on observation and interview, the surveyor observed two (2) bottles in Classroom 1 that were not individually labeled. Staff reported that bottles are generally labeled; however, the label wears off. Staff stated that all three (3) children enrolled at the center that are bottle fed have different types of bottles which helps staff identify which child each bottle belongs to.

Children's Records

Not In Compliance

1070 - Immunization

Not In Compliance

922 KAR 2:110. Section 3. 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 contained in a child's (DOE: 05/1/15) file, the surveyor found that the immunization certificate was no longer current as of 09/17/16. Upon interview, the director reported that the child's parents had been informed that an up-to-date immunization certificate was needed.

1075 - Enrollment Information

Not In Compliance

922 KAR 2:110. Section 3. 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 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 situation 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 and interview, the surveyor found that the file for a child (DOE: 5/4/16) did not contain the name of the preferred hospital or contact information to enable a person in charge to contact their preferred hospital. Upon interview, the director was not aware that the information was missing from the file.

Inspection Report

Written Documentation

Not In Compliance

1085 - Evacuation Plan

Not In Compliance

922 KAR 2:090. Section 5. Evacuation Plan.

(1) A licensed child-care center shall have a written evacuation plan in the event of a fire, natural disaster, or other threatening situation that may pose a health or safety hazard for a child in care in accordance with KRS 199.895.

Findings:

General: Based on review of documentation and interview, the surveyor found that the following sections on page five (5) of the child care center's Disaster Preparedness Plan were not completed: Off-site Evacuation Location, On-site Safe Evacuation Location, Off-site Safe Evacuation Location #2, and Center Disaster Contact Information. Upon interview, the director was not aware that the information was missing.

1120 - Fire Drills

Not In Compliance

922 KAR 2:110. Section 3. Records.

(1) A child-care center shall maintain:

(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 and interview, the surveyor found that monthly practiced fire drills had not been conducted for January and February 2016. The director reported that children were not present at the center for the majority of January and February due to poor weather conditions; therefore, the fire drill was not completed either month.

1140 - Fire Drills

Not In Compliance

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

(12) A fire drill shall be conducted during hours of operation:

- (a) At least monthly; and**
- (b) Documented.**

Findings:

General: Based on review of documentation and interview, the surveyor found that monthly practiced fire drills had not been conducted for January and February 2016. The director reported that children were not present at the center for the majority of January and February due to poor weather conditions; therefore, the fire drill was not completed either month.

Posted Documentation

In Compliance

Animals

In Compliance

Signature of Provider/Representative

Title

Date