



**Andy Beshear**  
GOVERNOR

**CABINET FOR HEALTH AND FAMILY SERVICES**  
**OFFICE OF INSPECTOR GENERAL**

**Eric Friedlander**  
SECRETARY

**Melissa A. Moore, Director**  
**Division of Regulated Child Care**  
Southern Branch  
116 Commerce Ave  
London, KY 40744

Phone: (606) 330-2030 Fax: (606) 330-2056  
<https://chfs.ky.gov/agencies/os/oig>

**Adam Mather**  
INSPECTOR GENERAL

**Inspection Report**

<b>Provider Name:</b> Busy Bees Daycare	<b>Provider Information</b>	<b>CLR No:</b> L358005
<b>Provider Address:</b> 547 Gary Morgan Road, Burkesville, KY, 42717	<b>Provider Type:</b> LICENSED TYPE I	<b>Capacity:</b> 32
<b>Owner(s):</b> Morgan, Betty Lou		<b>Director(s):</b> Morgan, Betty Lou

<b>Inspection Type:</b> Renewal Application	<b>Inspection Information</b>	<b>Inspection No:</b> 219675
<b>Date Initiated:</b> 06/15/2017 9:40 AM	<b>Date Concluded:</b> 06/15/2017 11:45 AM	
	<b>No. of Children Present:</b> 13	

Inspection Report	
<b>Supervision</b>	<b>In Compliance</b>
<b>Staffing Requirements</b>	<b>In Compliance</b>
<b>General Administration</b>	<b>Not In Compliance</b>
<b>100 - Plan of Correction/10 days</b>	<b>Not In Compliance</b>
<b>922 KAR 2:090. Section 9. Statement of Deficiency and Corrective Action Plans.</b> <b>(2) Except for a violation posing an immediate threat as handled in accordance with KRS 199.896(5)(c), a child-care center shall submit a written corrective action plan to the cabinet or its designee within ten (10) calendar days of receipt of the statement of deficiency to eliminate or correct the regulatory violation.</b>	
<b>Findings:</b> A PLAN OF CORRECTION WAS DUE ON 07/11/2017 AND AS OF 07/14/2017, THE PLAN OF CORRECTION HAS NOT BEEN RECEIVED.	
<b>Director Requirements</b>	<b>Not In Compliance</b>
<b>260 - Staff Evaluation</b>	<b>Not In Compliance</b>
<b>922 KAR 2:110. Section 4. Director Requirements and Responsibilities.</b> <b>(1) Effective with the adoption of this administrative regulation, a director shall:</b> <b>(j) Assess each staff person's interaction with children in care and classroom performance through an annual written performance evaluation;</b>	
<b>Findings:</b> General: Based on review of documentation, the surveyor found that three (3) staff (DOH: 6/1/07, 4/30/09, 5/15/09) did not have annual written performance evaluations. The director confirmed through interview that the evaluations had not been completed.	
<b>265 - Health, Safety, Comfort</b>	<b>Not In Compliance</b>
<b>922 KAR 2:110. Section 4. Director Requirements and Responsibilities.</b> <b>(1) Effective with the adoption of this administrative regulation, a director shall:</b> <b>(l) Provide for the health, safety, and comfort of each child;</b>	
<b>Findings:</b> General: Based on observation, the surveyor found the following: (1.) A one-year-old child was sleeping in his car seat inside of a crib. The director confirmed through interview that the child had been sleeping in his car seat inside the crib for over thirty (30) minutes. (2.) A plunger was located inside the children's restroom. The plunger was accessible to the children.	

Inspection Report					
Employee Records	Not In Compliance				
<b>315 - Educational Requirements</b>	<b>Not In Compliance</b>				
<b>922 KAR 2:110. Section 5. Staff Requirements.</b> <b>(1) Child-care center staff:</b> <b>(a) Hired after January 1, 2009, who have supervisory power over a minor and are not enrolled in secondary education, shall have a:</b> <b>1. High school diploma;</b> <b>2. GED or qualifying documentation from a comparable educational entity; or</b> <b>3. Commonwealth Child Care Credential as described in 922 KAR 2:250;</b>					
<b>Findings:</b> General: Based on review of documentation, the surveyor found that a staff's (DOH: 7/1/16) file did not contain a high school diploma, GED, or Commonwealth Child Care Credential.					
<b>320 - TB Verification</b>	<b>Not In Compliance</b>				
<b>922 KAR 2:110. Section 5. Staff Requirements.</b> <b>(1) Child-care center staff:</b> <b>(b) Shall provide, prior to employment and every two (2) years thereafter:</b> <b>1. A statement from a health professional that the individual is free of active tuberculosis; or</b> <b>2. A copy of negative tuberculin results.</b>					
<b>Findings:</b> General: Based on review of documentation, the surveyor found that staff's (DOH: 7/18/03) file did not have a copy of a negative tuberculin result in the staff's file. During interview, the staff reported having the test completed. Documentation of the negative tuberculin result could not be provided at the time of the surveyor's visit.					
<b>340 - Training</b>	<b>Not In Compliance</b>				
<b>922 KAR 2:110. Section 5. Staff Requirements.</b> <b>(14) In accordance with KRS 199.896(15) and (16), a staff person with supervisory authority over a child shall complete the following:</b> <b>(a) Six (6) hours of cabinet-approved orientation within the first three (3) months of employment;</b> <b>(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</b> <b>(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.</b>					
<b>Findings:</b> General: Based on review of documentation, and ECE - TRIS, the surveyor found the following: (1.) Three (3) staff (DOH: 7/1/16, 7/1/16, 2/18/17) did not complete six (6) hours of cabinet - approved orientation within their first three (3) months of employment. (2.) One (1) staff (DOH: 4/30/09) has not completed the one and one - half (1 1/2) hours of pediatric abusive head trauma training. (3.) One (1) staff (DOH: 7/18/03) obtained only two and one - half (2 1/2) hours of the required fifteen (15) hours of cabinet - approved early care and education training.					
<table> <tr> <th>Programming</th><th>In Compliance</th></tr> <tr> <th>Premises</th><th>Not In Compliance</th></tr> </table>		Programming	In Compliance	Premises	Not In Compliance
Programming	In Compliance				
Premises	Not In Compliance				
<b>520 - Floors, Walls, Ceilings</b>	<b>Not In Compliance</b>				
<b>922 KAR 2:120. Section 4. Premises Requirements.</b> <b>(9) Floors, walls, and ceilings shall be smooth, in good repair, and constructed to be easily cleaned.</b>					
<b>Findings:</b> General: Based on observation, the surveyor found the following: (1.) A small hole was observed in a ceiling tile in the Preschool Classroom. (2.) The wall board in the Preschool Classroom was pulled loose from the wall near the baseboard. (3.) A hole was observed in the wall of the Preschool Classroom. (4.) Several tears were observed in the carpet of the Infant Room.					
<table> <tr> <th>Hygienic Practices</th><th>Not In Compliance</th></tr> </table>		Hygienic Practices	Not In Compliance		
Hygienic Practices	Not In Compliance				
<b>625 - Diaper Changing Area/Surface</b>	<b>Not In Compliance</b>				
<b>922 KAR 2:120. Section 10. Toilet, Diapering, and Toiletry Requirements.</b> <b>(10) When a child is diapered, the child shall:</b> <b>(b) Be placed on a surface that is:</b> <b>1. Clean;</b> <b>2. Padded;</b> <b>3. Free of holes, rips, tears, or other damage;</b> <b>4. Nonabsorbent;</b> <b>5. Easily cleaned; and</b> <b>6. Free of any items not used for diaper changing.</b>					
<b>Findings:</b> General: Based on observation, the surveyor found the diaper changing pad in the bathroom to be dirty with light brown stains.					

Inspection Report	
First Aid/Medication	Not In Compliance
<b>670 - Medication</b>	<b>Not In Compliance</b>
<b>922 KAR 2:120. Section 7. First Aid and Medicine.</b> <b>(6) Medication, including refrigerated medication, shall be:</b> <b>(a) Stored in a separate and locked place, out of the reach of a child;</b> <b>(b) Kept in the original bottle; and</b> <b>(c) Properly labeled.</b> <b>(7) Medication shall not be given to a child if the expiration date on the bottle has passed.</b>	
<b>Findings:</b> General: Based on observation, the surveyor found three (3) medications in an unlocked dresser drawer in the Infant Room. The medications were Mucinex Cough Syrup, Benadryl, and Triamcinolone Acetonide. During interview, the director stated she was unaware of the medications being in the unlocked drawer.	
<b>Outdoor Play Area</b>	<b>In Compliance</b>
<b>Equipment</b>	<b>In Compliance</b>
<b>Transportation</b>	<b>Not Applicable</b>
<b>Food Service</b>	<b>In Compliance</b>
<b>Children's Records</b>	<b>In Compliance</b>
<b>Written Documentation</b>	<b>Not In Compliance</b>
<b>1090 - Policies and Procedures</b>	<b>Not In Compliance</b>
<b>922 KAR 2:110. Section 2. General.</b> <b>(5) Program policies and procedures shall:</b> <b>(a) Be in writing; and</b> <b>(b) Include:</b> <b>1. Staff policies;</b> <b>2. Job descriptions;</b> <b>3. An organization chart;</b> <b>4. Chain of command; and</b> <b>5. Other procedures necessary to ensure implementation of:</b> <b>a. KRS 199.898, Rights for children in child-care programs and their parents, custodians, or guardians - posting and distribution requirements;</b> <b>b. 922 KAR 2:090, Child-care center licensure;</b> <b>c. 922 KAR 2:120, Child-care center health and safety standards; and</b> <b>d. This administrative regulation.</b>	
<b>Findings:</b> General: Based on review of documentation, the surveyor found that the chain of command needs updated as it does not contain the most recent hired staff.	
<b>1105 - Professional Development</b>	<b>Not In Compliance</b>
<b>922 KAR 2:110. Section 3. Records.</b> <b>(1) A child-care center shall maintain:</b> <b>(f) A written annual plan for child-care staff professional development;</b>	
<b>Findings:</b> General: Based on review of documentation, the surveyor found that four (4) staff (DOH: 6/1/07, 4/30/09, 5/15/09, 7/18/03) did not have written annual plans for professional development.	
<b>1120 - Fire Drills</b>	<b>Not In Compliance</b>
<b>922 KAR 2:110. Section 3. Records.</b> <b>(1) A child-care center shall maintain:</b> <b>(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;</b>	
<b>Findings:</b> General: Based on review of documentation, the surveyor found that the fire drill conducted in March of 2017 did not contain a list of the children that participated in the drill.	
<b>Posted Documentation</b>	<b>In Compliance</b>
<b>Animals</b>	<b>In Compliance</b>

Signature of Provider/Representative

Title

Date