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Inspection Report

Provider Name: Cornerstone Christian Academy	Provider Information	CLR No: L358522
Provider Address: 3850 Frankfort Road, Shelbyville, KY, 40065	Provider Type: LICENSED TYPE I	Capacity: 42
Owner(s): Cornerstone Christian Academy, Inc.		Director(s): Holloway, Renae Beth

Inspection Type: Renewal Application	Inspection Information	Inspection No: 246744
Date Initiated: 11/01/2018 11:27 AM	Date Concluded: 11/01/2018 1:35 PM	
	No. of Children Present: 30	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	Not In Compliance

250 - Child Abuse/Neglect Report **Not In Compliance**

922 KAR 2:090. Section 12. Reports.
(2) An incident of child abuse or neglect shall be reported to the cabinet pursuant to KRS 620.030.

Findings:

General: Based on review of documentation and interview, the child care center failed to comply with regulations regarding general administration. The child care center failed to provide a child/abuse neglect report policy, whereas staff should report such incidents to the appropriate authority if child abuse or neglect is suspected without notifying management prior to making a report of child abuse/neglect.
Interview with the director revealed the policy as it is written in the facility handbook, indicates, "The procedure to report suspected abuse is to converse with the Guidance Counselor or Principal for further instruction. Employees may report to Social Services if they feel it is necessary. We encourage employees to first inform the Counselor and then the Counselor make the referral to Social Services and Parent/Caregiver if necessary."

Director Requirements	In Compliance
Employee Records	Not In Compliance

390 - 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 and interview, the child care center failed to maintain employee records in accordance with regulations. Review of staff files revealed the files for two (2) staff members with the hire dates of 09/15/2017 and 08/26/2018 did not contain proof of education documentation (high school diploma, GED, or Commonwealth Child Care Credential).
Interview with the director revealed this information was not available at the time of survey.

Inspection Report

395 - 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 and interview, the child care center failed to maintain employee records in accordance with regulations. Review of staff files revealed the file for a staff member with the hire date of 08/26/2018 failed to contain a tuberculin results or a statement from a health professional that the individual is free of active tuberculosis. Interview with the director revealed this information was unavailable at the time of survey.

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 report revealed the fifteen (15) hours of cabinet approved training was not presented for review at the time of survey for the director and three (3) staff members with the hire dates of 08/01/2014, 01/01/2017, and 09/15/2017. Interview with the director revealed this information was unavailable at the time of survey.

Programming

In Compliance

Premises

Not In Compliance

650 - Toilet

Not In Compliance

922 KAR 2:120. Section 10. Toilet, Diapering, and Toiletry Requirements.

- (4) Each toilet shall:**
(a) Be kept in clean condition;
(b) Be kept in good repair;
(c) Be in a lighted room; and
(d) Have ventilation to outside air.

Findings:

General: Based on observation, the child care center failed to comply with regulations regarding premises. In the Pre-K 4 A bathroom there was a toilet in that had a brown and yellow substance indicative of urine and feces in the bowl.

Hygienic Practices

In Compliance

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

Not Applicable

Food Service/Food Program

In Compliance

Food Service

In Compliance

1140 - 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 and interview, the child care center failed to maintain children's records in accordance with regulatory requirements. The record for a child with the enrollment date of 04/08/2015 failed to contain the name of a person who is designated in writing to pick-up the child. Interview with the director revealed the requested documentation was unavailable at the time of survey.

Written Documentation

Not In Compliance

1150 - 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 and 42 U.S.C. 9858c(c)(2)(U).**

Findings:

General: Based on review of documentation and interview with the director, the child care center failed to maintain written documentation in accordance with regulatory requirements. The child care center director was unable to present for review a current 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 that had been submitted to the local emergency management team.

Interview with the director revealed she was unable to determine the last time the plan was submitted because she was not aware it needed to be submitted to the local emergency management team.

1155 - Policies and Procedures

Not In Compliance

922 KAR 2:090. Section 8. General.

- (4) Program policies and procedures shall:**
- (a) Be in writing; and**
- (b) Include:**
- 1. Staff policies;**
 - 2. Job descriptions;**
 - 3. An organization chart;**
 - 4. Chain of command; and**
 - 5. Other procedures necessary to ensure implementation of:**
 - a. KRS 199.898, Rights for children in child-care programs and their parents, custodians, or guardians - posting and distribution requirements;**
 - b. 922 KAR 2:120, Child-care center health and safety standards;**
 - c. 922 KAR 2:280, Background checks for child care staff members, reporting requirements, and appeals; and**
 - d. This administrative regulation.**

Findings:

General: Based on review of documentation and interview, the child care center failed to comply with regulations regarding written documentation. Review of the facility handbook revealed it did not contain the job descriptions of each staff member's role in the child care center. Interview with the director revealed the requested documentation was unavailable at the time of survey.

1190 - Orientation Procedure

Not In Compliance

922 KAR 2:120. Section 2. Child Care Services.

- (3)(b) The program shall include:**
- 2. Written policy that specifies that the procedures that were taught at the orientation training shall be implemented by each child-care center staff member.**

Findings:

General: Based on review of documentation and interview, the child care center failed to comply with regulations regarding written documentation. Review of documentation revealed there was no written policy that specifies that the procedures that were taught at the orientation training shall be implemented by each child-care center staff member. Interview with the director revealed the requested documentation was unavailable at the time of survey.

Posted Documentation

In Compliance

Signature of Provider/Representative

Title

Date