**Andy Beshear** 

**GOVERNOR** 



# KID013A v2.0

# CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

# Melissa A. Moore, Director

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**Inspection Report** 

Eric Friedlander SECRETARY

Adam Mather INSPECTOR GENERAL

	Provider Information	
Provider Name: La Petite Academy	Provider Type: LICENSED TYPE I	CLR No: L354320
Provider Address: 148 Malibu Drive, Lexington, KY, 40503		Capacity: 139
Owner(s): La Petite Academy, Inc.		Director(s): Chappell, Christa
	Inspection Information	
Inspection Type: Renewal Application		Inspection No: 290291
Date Initiated: 08/14/2019 8:50 AM	Date Concluded: 08/14/2019 11:15 AM	
	No. of Children Present: 103	
	Inspection Report	
	Background Checks	In Compliance
	Supervision	In Compliance
	Staffing Requirements	In Compliance
	General Administration	In Compliance
	Director Requirements	Not In Compliance
45 - Staff Evaluation		Not In Compliance
922 KAR 2:090. Section 10. Director Requirements a	nd Responsibilities.	
(1) A director shall: (i) Assess each staff person's interaction with child	dren in care and classroom performance through an	annual written performance evaluation:
Findings:		
•	a staff member hired 7/21/14 did not have a current annual writt	en performance evaluation on file.
,	Employee Records	Not In Compliand
90 - 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 supervise	ory power over a minor and are not enrolled in secor	Idary education, shall have a:
1. High school diploma:		
2. GED or qualifying documentation from a compar		
3. Commonwealth Child Care Credential as describ	oed in 922 KAR 2:250;	
Findings:		

General: Based on review of documentation, a staff member hired 7/24/19 did not have proof of educational qualifications on file.



### Inspection Report

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# 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:

395 - TB Verification

Based on review of documentation, a staff member hired 8/12/19 did not have evidence of a negative tuberculosis screening on file.

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 onehalf (1 ½) hours of cabinet-approved pediatric abusive head trauma training completed once every five (5) years.

#### Findings:

General: Based on review of documentation, the following was found:

1.) There was no record of six (6) hours of cabinet-approved orientation training on ECE-TRIS for three (3) staff members hired 6/4/18, 7/9/18, and 8/17/18.

2.) Three (3) staff members did not have records on ECE-TRIS evidencing completion of Pediatric Abusive Head Trauma Training within the past five (5) years. A staff member hired 3/5/18 last completed PAHT training on 5/14/12, a staff member hired 4/8/2002 last completed PAHT training on 1/3/14, and a staff member hired 1/19/16 last completed the PAHT training on 1/2/4/13.

3.) Two (2) staff members hired 6/4/18 and 2/3/18 did not have record of fifteen (15) hours of annual cabinet approved early care and education training on file for review. Staff hired 6/4/18 had ten (10) hours recorded on ECE-TRIS, and staff hired 2/3/18 had twelve (12) hours of training recorded on ECE-TRIS.

	Programming	In Compliance
	Premises	Not In Compliance
640 - Toilet Room		Not In Compliance
922 KAR 2:120. Section 10. Toilet, Diapering, and T	piletry Requirements.	
(2) A toilet room shall:		
(a) 1. Be provided for each gender; or		
2. A plan shall be implemented to use the same toilet room at separate times;		
(b) Have a supply of toilet paper; and		
(c) Be cleaned and disinfected daily.		

#### Findings:

General: Based on observation, it was determined this regulatory requirement was not met. During a tour of the Early PreSchool Room, the surveyor observed a good amount of tissue paper to be lying on the floor of the toilet room. The tissue paper was wet and water was also on the floor in the toilet room. The surveyor noted the class had just left the room to go to the playground.

Hygienic Practices	In Compliance
First Aid/Medication	In Compliance
Outdoor Play Area	In Compliance
Equipment	Not In Compliance
- Individual Bedding Storage	Not In Compliance

### 922 KAR 2:120. Section 6. Sleeping and Napping Requirements. (9) Individual bedding shall be stored in a sanitary manner.

#### Findings:

810 -

General: Based on observation, it was determined this regulatory requirement was not met.

1. During a tour of the Toddler 1 room, the surveyor observed the cots for sleeping to be stored inside a closet located in the room. The cots were stacked and a red tub containing sheets was located on top of the cots. The top cot had a sheet attached and the tub was directly on the sheet. This is not a sanitary method for cot storage.

2. During a tour of the Toddler 2 room, the surveyor observed the cots for sleeping to be stored inside a closet located in the room. The cots were stacked and a red tub and a blue tub were located on top of the cots and directly touching the top cot. A bottle filled with liquid was also found on the cots and was directly touching the top cot. This is not a sanitary method of cot storage.

3. During a tour of the PreSchool1 Room, the surveyor observed the cots for sleeping to be stored in a closet located inside the classroom. The cots were stacked and two (2) wicker type baskets were located on top of the cots. The baskets were directly touching the top cot. The baskets contained Lego type blocks. This is not a sanitary method for cot storage.

CABINET FOR HEALTH

Transportation	In Compliance
Food Service/Food Program	In Compliance
Food Service	In Compliance
Children's Records	In Compliance
KENTUCKY.	An Equal Opportunity Employer M/F/D

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Written	Documentation
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1170 - Professional Development

### 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, Two (2) staff members hired 8/13/18 and 6/4/18 did not have a professional development plan available on file for review.

Posted Documentation	In Compliance
Animals	In Compliance

Not In Compliance

**Not In Compliance** 

