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<https://chfs.ky.gov/agencies/os/oig>

**Inspection Report**

<b>Provider Name:</b> Sherri Sohm's Little Rascals	<b>Provider Information</b>	<b>CLR No:</b> L358880
<b>Provider Address:</b> 376 Hwy 44 West, Shepherdsville, KY, 40165	<b>Provider Type:</b> LICENSED TYPE II	<b>Capacity:</b> 12
<b>Owner(s):</b> Sohm, Sherri Lynn		<b>Director(s):</b> Sohm, Sherri Lynn

<b>Inspection Type:</b> Renewal Application	<b>Inspection Information</b>	<b>Inspection No:</b> 305269
<b>Date Initiated:</b> 11/20/2020 9:35 AM	<b>Date Concluded:</b> 11/20/2020 11:20 AM	
	<b>No. of Children Present:</b> 5	

Inspection Report	
<b>Background Checks</b>	<b>In Compliance</b>
<b>Supervision</b>	<b>In Compliance</b>
<b>Staffing Requirements</b>	<b>In Compliance</b>
<b>General Administration</b>	<b>In Compliance</b>
<b>Director Requirements</b>	<b>In Compliance</b>
<b>Employee Records</b>	<b>Not In Compliance</b>
<b>400 - CPR/First Aid Coverage</b>	<b>Not In Compliance</b>

**922 KAR 2:090. Section 11. Staff Requirements.**  
**(3) For a child-care center licensed for infant, toddler, or preschool-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills:**  
**(a) Infant and child cardiopulmonary resuscitation; and**  
**(b) Infant and child first aid.**  
**(4) For a child-care center licensed for school-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills:**  
**(a) Adult cardiopulmonary resuscitation; and**  
**(b) First aid.**

**Findings:**

General: Review of two (2) staff files revealed there was not a qualified staff member certified in a cabinet approved adult and pediatric cardiopulmonary resuscitation and first aid. Interview with the staff in charge revealed that she / he and the qualified substitute took the class online.

<b>Programming</b>	<b>In Compliance</b>
<b>Premises</b>	<b>In Compliance</b>
<b>Hygienic Practices</b>	<b>In Compliance</b>
<b>First Aid/Medication</b>	<b>In Compliance</b>
<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/Food Program</b>	<b>In Compliance</b>
<b>Food Service</b>	<b>In Compliance</b>

**Inspection Report**

<b>Children's Records</b>	<b>In Compliance</b>
<b>Written Documentation</b>	<b>In Compliance</b>
<b>Posted Documentation</b>	<b>In Compliance</b>
<b>Animals</b>	<b>In Compliance</b>
<b>Emergency Regulation</b>	<b>In Compliance</b>

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Signature of Provider/Representative

Title

Date