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Andy Beshear GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

Melissa A. Moore, Director **Division of Regulated Child Care**

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Eric Friedlander SECRETARY

Adam Mather INSPECTOR GENERAL

Inspection Report

Provider Information

Provider Type: LICENSED TYPE I

Capacity: 20

Director(s): Bryan, Mary Lynn

CLR No: 1359186

Provider Address: 413 First Street, New Haven, KY, 40051

Owner(s): St. Catherine Church

Provider Name: St. Catherine Childcare

Inspection Information

Date Concluded: 02/19/2018 11:31 AM

No. of Children Present: 17

Inspection No: 243635

Inspection Type: Renewal Application Date Initiated: 02/19/2018 9:48 AM

Inspection Report

Background Checks

Supervision

Staffing Requirements

In Compliance In Compliance

In Compliance

Not In Compliance

General Administration Not In Compliance

155 - Liability Insurance

922 KAR 2:090. Section 6. License Issuance.

(8) To qualify for a preliminary license, or maintain a regular license, a child-care center shall:

(d) Provide written proof of liability insurance coverage of at least \$100,000 per occurrence;

Findings:

General: Based on review of documentation and interview, the child care center failed to maintain general administration in accordance with regulations. The presented Catholic Mutual Relief liability insurance has lapsed 07/01/2016-07/01/2017, with no active coverage for the child care facility. Interview with the director revealed current documentation was unavailable at the time of survey.

Director Requirements

Not In Compliance Not In Compliance

345 - Staff Evaluation 922 KAR 2:090. Section 10. Director Requirements and Responsibilities.

- (1) A director shall:
- (j) Assess each staff person's interaction with children in care and classroom performance through an annual written performance evaluation;

Findings:

General: Based on review of documentation and interview, the child care center failed to comply with regulations for director requirements. Review of staff files revealed an annual written performance evaluation was not presented for three (3) staff member with the hire dates of 08/24/2012, 08/04/2014, and 11/23/2015.

Interview with the director revealed, the requested information was unavailable at the time of survey.

Employee Records

Programming

Premises

Hygienic Practices

First Aid/Medication

Outdoor Play Area

In Compliance

In Compliance

In Compliance

In Compliance

In Compliance

In Compliance



Inspection Report

Equipment

Not In Compliance

815 - Toys/Furniture Not In Compliance

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

- (1) All toys 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, the child care center failed to comply with regulations regarding equipment. In the preschool room there was a wooden table that had several areas of paint chipping away from it.

Transportation

Not Applicable

Food Service/Food Program

In Compliance

Food Service

In Compliance

Children's Records

Not In Compliance

1135 - Immunization Not In Compliance

922 KAR 2:090. Section 9. 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 and interview, the child care center failed to maintain children's records in accordance with regulatory requirements. The records for a child with the enrollment date of 10/30/2017 did not contain a current immunization document with specified time, including a statement that the certificate shall not be valid after the specified date.

Interview with the director revealed, the requested information was unavailable at the time of survey.

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, child care center failed to maintain children's records in accordance with regulatory requirements. The records for children with the enrollment dates of 08/08/2017, 08/08/2017, 10/30/2017, 07/31/2017, and 08/02/2017 did not contain a preferred hospital.

The records for children with the enrollment dates of 10/30/2017 and 08/02/2017 did not contain information for a physician.

Interview with the director revealed the requested information was unavailable at the time of survey.

Written Documentation

Not In Compliance

1170 - Professional Development

922 KAR 2:090. Section 9. Records.
(1) A child-care center shall maintain:

Not In Compliance

(f) A written annual plan for child-care staff professional development;

Findings:

General: Based on review of documentation and interview, the child care center failed to maintain written documentation in accordance with regulations. Review of staff files revealed a professional development plan was not presented for review at the time of survey for three (3) staff members with the hire dates of 08/24/2012, 08/04/2014, and 11/23/2015.

Interview with the director revealed the requested information was unavailable at the time of survey.

Posted Documentation

In Compliance

Animals

In Compliance



