Andy Beshear

GOVERNOR



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

Melissa A. Moore, Director

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> Inspection Report **Provider Information**

Eric Friedlander SECRETARY

Adam Mather **INSPECTOR GENERAL**

Provider Name: GG's Playhouse Provider Type: LICENSED TYPE I CLR No: 1 359497 Provider Address: 720 Old Monticello Road, Albany, KY, 42602 Capacity: 36 Owner(s): G G's Playhouse, Llc Director(s): Thacker, Gina **Inspection Information** Inspection Type: Renewal Application Inspection No: 307290 Date Concluded: 07/13/2021 2:00 PM Date Initiated: 07/13/2021 11:38 AM No. of Children Present: 33 **Inspection Report Background Checks** In Compliance In Compliance Supervision **Staffing Requirements** In Compliance **General Administration** Not In Compliance 155 - Liability Insurance Not In Compliance 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Findings: General: Based on review of documentation, the surveyor found that the center's liability insurance was no longer current as of 04/29/21. During interview, staff stated the center's insurance was current; however, the documentation of the center's current insurance was not provided during the surveyor's visit. 210 - Licensee Responsibility **Not In Compliance** 922 KAR 2:090. Section 8. General. (1) A licensee shall: (a) Be responsible for the operation of the child-care center pursuant to this administrative regulation, 922 KAR 2:120, and 922 KAR 2:280; and (b) Protect and assure the health, safety, and comfort of each child. Findings: General: Based on observation, the surveyor found a plunger was on the floor beside a toilet in the girl's restroom. The plunger was accessible to the children; therefore, the health, safety, and comfort of the children were compromised. **Not In Compliance** 922 KAR 2:120. Section 4. Premises Requirements. (2) A child-care center shall be in compliance with the State Fire Marshal and the local zoning laws. Findings: General: Based on review of documentation, the surveyor found the most recent State Fire Marshal report was dated 9/7/16. Staff stated a fire marshal report has not been completed since 9/7/16. Staff reported that staff has attempted to make telephone contact with the fire marshal; however, no one answers the telephone. In Compliance **Director Requirements**



KID013A v2.0

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290 - Fire Marshal/Zoning Compliance

Inspection Report

Employee Records

Not In Compliance Not In Compliance

Not In Compliance

In Complia

395 - TB Verification

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, the surveyor found a staff's (DOH: 5/31/19) file contained a negative tuberculin result that was no longer current after 3/23/21; therefore, the child-care center failed to provide documentation showing that the employee is free of active tuberculosis or provide a copy of a current negative tuberculin result.

410 - Training

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 completed within the first three (3) months of employment in a child care program;

(b) Nine (9) hours of cabinet-approved early care and education training within the first year of employment in a child care program, including one

- and one-half (1 $\frac{1}{2}$) hours of cabinet-approved pediatric abusive head trauma training; and
- (c) Fifteen (15) hours of cabinet-approved early care and education training completed between July 1 and the following June 30 of each

subsequent year of employment in a child care program, including one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training completed once every five (5) years.

(17) A staff person's compliance with training requirements of this section shall be verified through the cabinet-designated database maintained pursuant to 922 KAR 2:240.

Findings:

General : Based on interview, the surveyor found the following:

1. One (1) staff (DOH: 6/8/20) did not complete six (6) hours of cabinet-approved orientation training. Documentation was not provided during the surveyor's visit to verify that the staff had obtained orientation training. Information regarding the staff's training record is not entered into ECE-TRIS.

2. Staff (DOH: 6/8/20) did not complete the one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training. During interview, staff confirmed that the staff did not complete pediatric abusive head trauma training. Information regarding the staff's training record is not entered into ECE-TRIS.

Programming

Programming		In Compliance
	Premises	Not In Compliance
0 - Inaccessible Items		Not In Compliance
922 KAR 2:120. Section 3. General Requirements. (7) The following shall be inaccessible to a child in (a) Toxic cleaning supplies, poisons, and insecticion (b) Matches, cigarettes, lighters, and flammable lind (c) Personal belongings and medications of staff.	des;	
Findings:		
General: Based on observation, the surveyor found liquid har thus, the liquid hand soap was accessible to the children.	nd soap placed on the sink located outside of the Girls Restroom stated on	n the label "Keep Out of Reach of Children";
0 - Premises Requirements		Not In Compliance
922 KAR 2:120. Section 4. Premises Requirements. (1) The premises shall be: (a) Suitable for the purpose intended; (b) Kept clean and in good repair;		
Findings:		
General: Based on observation, the surveyor found that the s they would check on the drain.	sink was very slow to drain; therefore, the sink drain was not in good repair	r. During interview, staff-in-charge stated that
	Hygienic Practices	In Complianc

First Aid/Medication	In Compliance
Outdoor Play Area	In Compliance
Equipment	In Compliance
Transportation	In Compliance
Food Service/Food Program	In Compliance



Inspection Report

Food Service

Findings:

(b) Kitchenware;

General: Based on observation, the surveyor found the following:

1. Food particles under the stovetop burners.

1040 - Kitchen Equipment Clean and Sanitary

(c) Food contact surfaces of equipment;

(f) Cooking surfaces of equipment; and (g) Nonfood contact surfaces of equipment.

(a) Eating and drinking utensils;

(d) Food storage utensils;(e) Food storage containers;

922 KAR 2:120. Section 8. Kitchen Requirements. (7) The following shall be clean and sanitary:

2. Food particles inside of the oven.

3. A brown liquid on the bottom shelf of the refrigerator.

4. A red substance in the freezer. During interview, staff-in-charge stated that a popsicle had busted in the freezer.

	Children's Records	Not In Compliand
40 - 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 parer	nt;	
2. Retained on file on the first day the child a	attends the child-care center; and	
3. To contain:		
a. Identifying information about the child, w	hich includes, at a minimum, the child's name, address, and dat	e 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 e	employment;	
(ii) Family physician; and		
(iii) Preferred hospital;		
c. The name of each person who is designat		
d. The child's general health status and med	dical history including, if applicable:	
(i) Allergies;		
• • •	n activities with specific instructions from the child's parent or	health professional; and
• • •	rty professional services in the child-care center;	
	son to be contacted in an emergency involving or impacting the	
f. Authorization by the parent for the child-c	are center to seek emergency medical care for the child in the p	barent's absence;
Findings:		
•	eyor found that the file presented for review for a child (DOE: 8/22/18) did not co ad to maintain children's records.	ontain the name or telephone number for the
General: Based on review of documentation, the surve		· ·
General: Based on review of documentation, the surve	ed to maintain children's records.	ontain the name or telephone number for the Not In Complianc Not In Complianc
General: Based on review of documentation, the surve preferred hospital; therefore, the child-care center faile 70 - Professional Development	ed to maintain children's records.	Not In Complian
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General: Based on review of documentation, the surve preferred hospital; therefore, the child-care center faile 70 - 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 p Findings: General: Based on review of documentation, the surve	ed to maintain children's records. Written Documentation professional development; eyor was unable to find verification that a written annual professional developme	Not In Complian Not In Complian
General: Based on review of documentation, the surve preferred hospital; therefore, the child-care center faile 70 - 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 p Findings: General: Based on review of documentation, the surve	Written Documentation Written Documentation	Not In Complian Not In Complian

The surveyor found that the professional development plans for staff (DOH: 4/14/16, 9/13/18, 3/26/12, 10/7/11 and 10/7/11) were not dated, and only had 2019 written at the top. During interview staff stated that the 2020 professional development plans probably had not been completed due to chaos related to COVID-19; therefore, the surveyor was unable to verify that the professional development plans had been completed annually, as required.

Posted Documentation	In Compliance
Animals	In Compliance



Not In Compliance

Not In Compliance