



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

Eric Friedlander
SECRETARY

Melissa A. Moore, Director
Division of Regulated Child Care
Southern Branch
116 Commerce Ave
London, KY 40744

Adam Mather
INSPECTOR GENERAL

Phone: (606) 330-2030 Fax: (606) 330-2056
<https://chfs.ky.gov/agencies/os/oig>

Inspection Report

Provider Name: Childrens House Montessori	Provider Information	CLR No: L375166
Provider Address: 135 Memorial Drive, Hazard, KY, 41701	Provider Type: LICENSED TYPE I	Capacity: 110
Owner(s): Children's House Montessori Inc.		Director(s): Combs, Amy Renee

Inspection Type: Renewal Application	Inspection Information	Inspection No: 319545
Date Initiated: 12/20/2021 9:45 AM	Date Concluded: 12/20/2021 1:45 PM	
	No. of Children Present: 59	

Inspection Report	
Background Checks	Not In Compliance
5 - Background check/left alone/dismissed/relocated	Not In Compliance
<p>922 KAR 2:280. Section 3. Implementation and Enforcement.</p> <p>(1) A person who is a child care staff member prior to January 1, 2018, shall submit to and complete background checks in accordance with this administrative regulation no later than September 30, 2018.</p> <p>(2) A child care staff member hired on or after April 1, 2018, shall:</p> <p>(a) Have completed the background checks required in accordance with this administrative regulation and been found to have no disqualifying offense prior to becoming a child care staff member; or</p> <p>(b) 1. Have submitted to the background checks required in accordance with this administrative regulation;</p> <p>2. Not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative regulation; and</p> <p>3. Be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.</p>	
Findings:	
General: Based on review of documentation, the surveyor found the following:	
<p>1. A staff's (Start Date: 12/13/21) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service. During interview, staff-in-charge stated that the individual was a volunteer and turned eighteen (18) years of age on the day of the surveyor's visit, 12/20/21. Based on review of the Kentucky National Background Check Service, the volunteer did not have a completed background check. The surveyor did not observe the volunteer working at the child-care center on the day of the visit, 12/20/21. Staff-in-charge stated that the volunteer has not worked alone with children. The volunteers file did not contain a completed Child Abuse/Neglect Background Check (CAN). Staff-in-charge stated that she was not aware she needed to complete a Child Abuse/Neglect Background Check for the volunteer.</p> <p>2. A staff's (DOH: 07/13/20) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service. Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check prior to 10/01/21. The surveyor did not observe the staff person working alone with children. Staff-in-charge stated that the staff person has not worked alone with children. During interview, staff-in-charge stated that she was not aware that the staff person had to have fingerprints and a completed background check through the Kentucky National Background Check Service by 10/01/21. The staff's file contained a completed Child Abuse/Neglect Background Check dated 07/10/20 and a completed Criminal Records Background Check dated 06/05/20.</p>	
Supervision	In Compliance
Staffing Requirements	In Compliance

Inspection Report

General Administration

Not In Compliance

225 - 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 review of documentation, the surveyor found the following:

1. A staff's (Start Date: 12/13/21) file did not contain documentation of a Child Abuse/Neglect Background Check. During interview, staff-in-charge stated that the individual was a volunteer and seventeen (17) years of age. The surveyor did not observe the volunteer at the child-care center on the day of the visit, 12/20/21. Staff-in-charge stated that the volunteer has not worked alone with children. Staff-in-charge stated that she was not aware she needed to complete a Child Abuse/Neglect Background Check on the volunteer.
2. A staff's (Start Date: 12/13/21) file did not contain documentation of a Child Abuse/Neglect Background Check. During interview, staff-in-charge stated that the individual was a volunteer and seventeen (17) years of age. The surveyor did not observe the volunteer at the child-care center on the day of the visit, 12/20/21. Staff-in-charge stated that the volunteer has not worked alone with children. Staff-in-charge stated that she was not aware she needed to complete a Child Abuse/Neglect Background Check on the volunteer.
3. A yellow mop bucket placed beside a white cabinet in the School Age Classroom that contained what appeared to be dirty water. The mop bucket was observed to be accessible to the children.
4. A black audio system placed on top of a small black mini refrigerator in the Preschool II Classroom and was observed to not appear to be secured.
5. A white shelf placed beside a countertop in the Preschool II Classroom that appeared to be unsteady. The white shelf was observed to sway side to side when touched.
6. Three (3) white shelves located in the Preschool I Classroom that appeared to be unsteady. The three (3) white shelves were observed to appear to move side to side when touched.
7. A black power audio system placed on top of a white shelf in the Preschool I Classroom. The white shelf appeared to be unsteady as it moved from side to side when touched.
8. A top drawer located beside the sink in the Preschool I Classroom that contained a pair of adult sized scissors that were accessible to the children.
9. A bottle of Soft Antibacterial Soap located on the countertop beside the sink in the Three Year Old Classroom that stated "Keep out of the Reach of Children" on the back label. The soap was observed to be accessible to the children.

Director Requirements

In Compliance

Employee Records

Not In Compliance

435 - 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 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 ½) 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 review of documentation and ECE-TRIS, the surveyor found the following:

1. A staff (DOH: 09/06/16) completed one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training on 10/18/16; therefore, the training was not completed within the last five years.
2. A staff (DOH: 06/12/18) completed one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training on 06/11/15; therefore, the training was not completed within the last five years.

Programming

In Compliance

Premises

Not In Compliance

585 - 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 sink located in the One Year Old Classroom contained what appeared to be dust with a slight yellow/brown buildup around the faucet; therefore, the sink was not kept clean.

Inspection Report

625 - Floors, Walls, Ceilings

Not In Compliance

922 KAR 2:120. Section 4. Premises Requirements.
(9) Floors, walls, and ceilings shall be smooth, in good repair, and constructed to be easily cleaned.

Findings:

General: Based on observation, the surveyor found six (6) ceiling tiles that contained brown stains in the Preschool II Classroom; therefore, the ceiling tiles were not in good repair. During interview, staff-in-charge stated that the roof had leaked and they had it repaired; however, it rained causing the ceiling to leak again. Staff-in-charge stated that she has the ceiling tiles to repair the ceiling and would have the roof repaired again.

695 - Toilet

Not In Compliance

922 KAR 2:120. Section 12. 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 surveyor found the following:

1. The base of the toilet and around the toilet seat hinges contained a yellow substance that appeared to be dried urine on the toilet located in the boys' restroom in the School Age Classroom; therefore, the toilet was not kept in clean condition.
2. The toilet seat on the toilet located in the girls' restroom in the School Age Classroom contained what appeared to be urine; therefore, the toilet was not kept in clean condition.
3. The toilet seat moved easily and was not tightly secured to the toilet in the girls' restroom located in the hallway near the office; therefore, the toilet was not kept in good repair. The toilet was located to the right when walking into the restroom.
4. The toilet seat moved easily and was not tightly secured to two (2) toilets in the boys' restroom located in the hallway near the office; therefore, the toilets were not kept in good repair.

Hygienic Practices

Not In Compliance

730 - Diaper Changing Area/Surface

Not In Compliance

922 KAR 2:120. Section 12. Toilet, Diapering, and Toiletry Requirements.
(10) When a child is diapered, the child shall:
(b) Be placed on a surface that is:
1. Clean;
2. Padded;
3. Free of holes, rips, tears, or other damage;
4. Nonabsorbent;
5. Easily cleaned; and
6. Free of any items not used for diaper changing.

Findings:

General: Based on observation, the surveyor found debris on the diaper changing table underneath the diaper changing pad in the One Year Old Classroom; therefore, the diaper changing surface was not clean.

First Aid/Medication	In Compliance
Outdoor Play Area	In Compliance
Equipment	In Compliance
Transportation	In Compliance
Kitchen Requirements	In Compliance
Food Service	In Compliance
Meal Planning/Center Provides Meals	In Compliance
Meal Planning/Center Does Not Provide Meals	In Compliance

Inspection Report

Children's Records

Not In Compliance

1250 - 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, the surveyor found the following children's (DOE: 04/30/21, 08/10/20, 05/06/20) files did not contain the contact telephone number for the child's preferred family physician.

Written Documentation

Not In Compliance

1270 - Daily Attendance Records

Not In Compliance

922 KAR 2:090. Section 9. Records.

(1) A child-care center shall maintain:

(c) Daily attendance records documenting the arrival and departure time of each child, including records that are required in accordance with 922 KAR 2:160, Section 13, if a child receives services from the child-care center through the Child Care Assistance Program;

Findings:

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

- 1. Five (5) children were present in the Nursery Classroom; however, only four (4) of the children were signed in on the daily attendance records.
- 2. Eight (8) children were present in the School Age Classroom; however, only five (5) of the children were signed in on the daily attendance records.

1305 - Fire Drills

Not In Compliance

922 KAR 2:120. Section 3. General Requirements.

(12) A fire drill shall be:

- (a) Conducted during hours of operation at least monthly; and**
- (b) Documented.**

(13) An earthquake drill, shelter-in-place or lockdown drill, and tornado drill shall be:

- (a) Conducted during hours of operation at least quarterly; and**
- (b) Documented.**

Findings:

General: Based on observation, the surveyor found no documentation of lock down drills conducted for the months of 2021. During interview, staff-in-charge stated that she had recently conducted a lock down drill and did not record the drill. Staff-in-charge stated that she would keep record of the lock down drills.

Posted Documentation

In Compliance

Animals

In Compliance

Signature of Provider/Representative

Title

Date