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GOVERNOR

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Adam Mather
INSPECTOR GENERAL

Inspection Report

Provider Name: Pikeville Scholar House Early Childhood Education Center	Provider Information Provider Type: LICENSED TYPE I	CLR No: L383202
Provider Address: 127 Saad Avenue, Pikeville, KY, 41501		Capacity: 92
Owner(s): The Pikeville Area Family Ymca, Inc.		Director(s): Justice-Fouts, Shelly Lynn

Inspection Type: Renewal Application	Inspection Information	Inspection No: 244194
Date Initiated: 04/24/2018 11:17 AM	Date Concluded: 04/24/2018 2:30 PM	
	No. of Children Present: 45	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	Not In Compliance
345 - Staff Evaluation	Not In Compliance

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:

Based on review of documentation, the surveyor found that the files for two (2) staff (DOH: 1/9/17 and DOH: 3/30/17) did not contain documentation of annual evaluations.

Employee Records	Not In Compliance
385 - Personnel File	Not In Compliance

922 KAR 2:090. Section 9. Records.

(1) A child-care center shall maintain:

(e) A current personnel file for each child-care center staff person to include:

1. Name, address, date of birth, and date of employment;
2. Proof of educational qualifications;
3. Record of annual performance evaluation;
4. Documentation of compliance with tuberculosis screening in accordance with Section 11(1)(b) of this administrative regulation; and
5. The results of background checks conducted in accordance with 922 KAR 2:280;

Findings:

General: Based on review of documentation and interview, the surveyor found that only the front page of the criminal records check results were on file for a staff (DOH: 11/17/17). The criminal record check had been submitted on 12/14/17. The Director was not aware that the page of the background check showing the results was missing from the file. The Director stated that the employee had not worked alone with the children.

395 - TB Verification

Not In Compliance

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, and interview, the following was found:

1. A staff file (DOH: 3/31/14) contained documentation of a tuberculin skin test that was interpreted on 2/3/16; therefore, the staff member had not completed a tuberculin skin test every two (2) years as required.
2. A staff file (DOH: 4/12/18) did not contain results of a tuberculin skin test completed within the past two (2) years.
3. A staff file (DOH: 11/17/17) did not contain results of a tuberculin skin test completed within the past two (2) years.

The Director was not aware that the tuberculin skin tests were not up to date.

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

Findings:

General: Based on review of documentation, review of ECE-TRIS, and interview, the following were found:

1. A staff file (DOH: 9/29/14) only contained documentation of nine (9) hours of annual training. Review of ECE-TRIS, confirmed that only nine (9) hours of annual training had been completed for 9/29/16 - 9/28/17.
2. A staff file (DOH: 8/19/15) only contained documentation of seven (7) hours of annual training. Review of ECE-TRIS, confirmed that only four (4) hours of annual training had been completed for 8/19/16 - 8/18/17.
3. A staff file (DOH: 8/19/15) did not contain record of completing Pediatric Abusive Head Trauma (PAHT) training within the last five (5) years. Review of ECE-TRIS, confirmed that the last time PAHT was completed was on 12/5/12.
4. A staff file (DOH: 11/2/15) only contained documentation of one (1) hours of annual training. Review of ECE-TRIS, confirmed that only one (1) hours of annual training had been completed for 11/2/16 - 11/1/17.
5. A staff file (DOH: 1/9/17) only contained documentation of ten and a half (10.5) hours of annual training. Review of ECE-TRIS, confirmed that only nine and a half (9.5) hours of annual training had been completed for 1/9/17 - 1/8/18.
6. A staff file (DOH: 1/9/17) did not contain documentation of completing six (6) hours of orientation. Review of ECE-TRIS, confirmed that orientation had not been completed.
7. A staff file (DOH: 5/6/17) did not contain documentation of having completed six (6) hours of orientation. Review of ECE-TRIS, confirmed that orientation had not been completed.
8. A staff file (DOH: 11/7/17) did not contain documentation of having completed six (6) hours of orientation. Review of ECE-TRIS, confirmed that orientation had not been completed.
9. A staff file (DOH: 10/6/17) contained documentation of completing PAHT training on 12/8/12. Review of ECE-TRIS, confirmed that PAHT training was last completed 12/8/12, therefore, it has not been completed within the past five (5) years.

The Director was not aware of the training discrepancies.

Inspection Report

Programming

Not In Compliance

420 - Program of Activities Followed

Not In Compliance

922 KAR 2:120. Section 2. Child Care Services.

(4) The child-care center shall provide a daily planned program:

- (a) Posted in writing in a conspicuous location with each age group and followed;
- (b) Of activities that are individualized and developmentally appropriate for each child served;
- (c) That provides experience to promote the individual child's physical, emotional, social, and intellectual growth and well-being; and
- (d) Unless the child-care center is a before- or after-school program that operates part day or less, that offers a variety of creative activities including the following:
 - 1. Art or music;
 - 2. Math or numbers;
 - 3. Dramatic play;
 - 4. Stories and books;
 - 5. Science or nature;
 - 6. Block building or stacking;
 - 7. Tactile or sensory activity;
 - 8. Multi-cultural exposure;
 - 9. Indoor or outdoor play in which a child makes use of both small and large muscles;
 - 10. A balance of active and quiet play, including group and individual activity;
 - 11. An opportunity for a child to:
 - a. Have some free choice of activities;
 - b. If desired, play apart from the group at times;

Findings:

General: Based on observation and interview, the following was found:

- 1. The lesson plan posted for the Younger One's was dated for 4/9 - 4/20/18. Staff stated they did not have an updated lesson plan.
- 2. The lesson plan posted for the Two's was dated for 4/9 - 4/20/18. Staff stated they had an updated lesson but had left it in their car that would not start that morning.
- 3. The lesson plan posted for the Preschool was dated for 4/9 - 4/13/18. Staff stated they did not have an updated lesson plan.

485 - Infant Sleep Position

Not In Compliance

922 KAR 2:120. Section 6. Sleeping and Napping Requirements.

(1) An infant shall sleep or nap on the infant's back unless the infant's health professional signs a waiver that states the infant requires an alternate sleeping position.

Findings:

General: Based on observation and interview, the surveyor found that a four-month-old infant was sleeping in a 4MOMS motorized seat. Staff reported that the infant has acid reflux but the center does not have a statement from the physician for an alternate sleep position.

Premises

In Compliance

Hygienic Practices

Not In Compliance

655 - Child Personal Care/Handwashing

Not In Compliance

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

(4) A child shall:

- (a) Be helped with personal care and cleanliness based upon their developmental skills; and
- (b) Wash his or her hands with liquid soap and warm running water:
 - 1. a. Upon arrival at the center; or
 - b. Within thirty (30) minutes of arrival for school-age children;
 - 2. Before and after eating or handling food;
 - 3. After toileting or diaper change;
 - 4. After handling animals;
 - 5. After touching an item or an area of the body soiled with body fluids or wastes; and
 - 6. After outdoor or indoor play time; and
- (c) Use hand sanitizer or hand-sanitizing wipes if liquid soap and warm running water are not available in accordance with paragraph (b) of this subsection. The child shall wash the child's hands as soon as practicable once liquid soap and warm running water are available.

Findings:

General: Based on observation and interview, the surveyor observed that a staff member failed to wash an infants hands after a diaper change in the Nursery. Upon interview, the staff stated they do not typically wash the children's hands.

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

Not Applicable

Food Service/Food Program

In Compliance

Food Service

In Compliance

Children's Records

In Compliance

Inspection Report		
Written Documentation		Not In Compliance
1175 - Earthquake/Tornado/Fire Drills		Not In Compliance
922 KAR 2:090. Section 9. Records. (1) A child-care center shall maintain: (h) A written record of quarterly practiced earthquake drills and tornado drills detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3; (i) A written record of practiced fire drills conducted monthly detailing the date, time, and children who participated in accordance with 922 KAR 2:120, Section 3; Findings: General: Based on review of documentation and interview, the surveyor was not presented with written documentation for the tornado drill for 10/2017 - 12/2017 or for the May 2017 fire drill. Staff stated they were unsure what would have happened to the documentation.		
1195 - Fire Drills		Not In Compliance
922 KAR 2:120. Section 3. General Requirements. (12) A fire drill shall be conducted during hours of operation: (a) At least monthly; and (b) Documented. (13) An earthquake drill and a tornado drill shall be: (a) Conducted during hours of operation at least quarterly; and (b) Documented. Findings: General: Based on observation and interview, the surveyor was not presented with documentation of a May 2017 fire drill. Staff stated they were not sure what happened to the documentation but they did think a drill was completed.		
Posted Documentation		In Compliance
Animals		In Compliance