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Inspection Report

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| 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): Bunch, Tabitha LeeAnn |

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| Inspection Type: Renewal Application | Inspection Information | Inspection No: 320664 |
| Date Initiated: 05/02/2022 3:08 PM | Date Concluded: 05/02/2022 5:47 PM | |
| | No. of Children Present: 35 | |

| Inspection Report | |
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| Background Checks | In Compliance |
| Supervision | In Compliance |
| Staffing Requirements | In Compliance |
| 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 observation, the surveyor found liquid hand soap placed on the sink in the restroom located in Classroom 202. The label on the hand soap stated, "Keep Out of Reach of Children". The liquid hand soap was accessible to the children creating a potential health and safety issue for the children.

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| Director Requirements | In Compliance |
| Employee Records | Not In Compliance |

405 - 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, the surveyor discovered the following:

1. A staff's personnel file (DOH: 2/8/2022) did not contain a statement from a health professional that the individual is free of active tuberculosis or a copy of negative tuberculin result. Staff-in-charge stated the staff must have failed to turn in the documentation for their file.
2. A staff's personnel file (DOH: 4/5/2022) did not contain a statement from a health professional that the individual is free of active tuberculosis or a copy of negative tuberculin result.

Therefore, the child-care center failed to show proof that the staff were free of active tuberculosis or provide a copy of a negative tuberculin result.

415 - CPR/First Aid Required Training

Not In Compliance

922 KAR 2:120. Section 7. First Aid and Medicine.
(8) Each center shall ensure that every staff member has received training on first aid and cardiopulmonary resuscitation (CPR).

Findings:

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

1. A staff's personnel file (DOH: 1/9/2017) did not contain documentation that the staff obtained training on first aid and cardiopulmonary resuscitation (CPR). Upon review of ECE-TRIS, the surveyor discovered that no date was entered to indicate that the employee received the training.
2. A staff's personnel file (DOH: 6/14/2021) did not contain documentation that the staff obtained training on first aid and cardiopulmonary resuscitation (CPR). Upon review of ECE-TRIS, the surveyor discovered that no date was entered to indicate that the employee received the training.
3. A staff's personnel file (DOH: 1/11/2022) did not contain documentation that the staff obtained training on first aid and cardiopulmonary resuscitation (CPR). Upon review of ECE-TRIS, the surveyor discovered that no date was entered to indicate that the employee received the training.

Therefore, the child-care center failed to ensure that every staff member receives training on first aid and cardiopulmonary resuscitation (CPR) as required.

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, the surveyor discovered the following:

1. The personnel file of one (1) staff (DOH: 1/11/2022) did not contain verification that the staff completed six (6) hours of cabinet-approved orientation training. Upon reviewing ECE-TRIS, the surveyor found that no date was listed indicating that orientation training was completed; therefore, the child-care center failed to ensure that the employee completed six (6) hours of cabinet-approved orientation within the first three (3) months of employment.
2. The personnel file of one (1) staff (DOH: 11/29/2018) did not contain verification that the staff completed the one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training. Upon reviewing ECE-TRIS, the surveyor found that no date was listed indicating that staff completed pediatric abusive head trauma training.

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 discovered the following:

1. Brown smears on the wall near the light switch of the restroom located in Classroom 202.
2. Brown smears on the door of the restroom located in Classroom 202.
3. A dried substance on the wall near the restroom sink located in Classroom 202 that appeared to be dried syrup.
4. Dirt/debris on the rugs in Classroom 206.
5. Several dead bugs on the floor, near the door leading out to the 2nd floor playground.

Therefore, the premises was not kept clean.

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 discovered what appeared to be urine inside the toilet in Classroom 202's restroom; thus, the child-care center failed to keep the toilet in clean condition.

Inspection Report

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| Hygienic Practices | In Compliance |
| First Aid/Medication | In Compliance |
| Outdoor Play Area | In Compliance |
| Equipment | In Compliance |
| Transportation | Not Applicable |
| Kitchen Requirements | In Compliance |
| Food Service | In Compliance |
| Meal Planning/Center Provides Meals | In Compliance |
| Meal Planning/Center Does Not Provide Meals | In Compliance |
| Children's Records | In Compliance |
| 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 and observation, the surveyor found that thirty-five (35) children were present at the child care center; however, only twenty-six (26) children were signed in on the daily attendance record.

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 review of documentation, the surveyor discovered that the documentation provided by the child-care center indicated that a lockdown/shelter-in-place drill was conducted on 07/30/2021. The child-care center could not provide documentation indicating that other lockdown/shelter-in place drills were conducted on any additional dates. Therefore, the child-care center failed to complete quarterly lockdown/shelter-in-place drills as required. Staff-in-charge stated that the lockdown/shelter-in-place drill conducted on 07/30/2021 was the only drill that had been completed.

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| Posted Documentation | In Compliance |
| Animals | In Compliance |

Signature of Provider/Representative

Title

Date