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Inspection Report

Provider Name: Telford Community Center YMCA, Inc.	Provider Information	CLR No: L383290
Provider Address: 75 Old Us 25 North, Berea, KY, 40475	Provider Type: LICENSED TYPE I	Capacity: 70
Owner(s): Telford Community Center Young Men's Christian Association, Incorporated		Director(s): Winstead, Calvetta Annette

Inspection Type: Renewal Application	Inspection Information	Inspection No: 216826
Date Initiated: 10/28/2016 2:50 PM	Date Concluded: 10/28/2016 4:37 PM	
	No. of Children Present: 6	

Inspection Report	
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	Not In Compliance

260 - Staff Evaluation **Not In Compliance**

922 KAR 2:110. Section 4. Director Requirements and Responsibilities.
(1) Effective with the adoption of this administrative regulation, 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, the surveyor found the following:

1. An employee's (08/11/14) file presented for review did not contain an annual performance evaluation.
2. An employee's (08/12/15) file presented for review did not contain an annual performance evaluation.
3. An employee's (08/06/15) file presented for review did not contain an annual performance evaluation.
4. An employee's (04/06/15) file presented for review did not contain an annual performance evaluation.

315 - Educational Requirements

Not In Compliance

922 KAR 2:110. Section 5. Staff Requirements.

(1) Child-care center staff:

(a) Hired after January 1, 2009, who have supervisory power over a minor and are not enrolled in secondary education, shall have a:

- 1. High school diploma;**
- 2. GED or qualifying documentation from a comparable educational entity; or**
- 3. Commonwealth Child Care Credential as described in 922 KAR 2:250;**

Findings:

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

1. An employee's (08/12/15) file presented for review did not contain the required education verification.
2. An employee's (08/06/15) file presented for review did not contain the required education verification.
3. An employee's (02/26/15) file presented for review did not contain the required education verification.

320 - TB Verification

Not In Compliance

922 KAR 2:110. Section 5. 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, an employee's (DOH: 08/11/14) file presented for review did not contain a current negative tuberculin skin result.

340 - Training

Not In Compliance

922 KAR 2:110. Section 5. Staff Requirements.

(14) 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 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 pediatric abusive head trauma training completed once every five (5) years.**

Findings:

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

1. A staff member (DOH: 08/11/14) did not complete a total of fifteen (15) hours of approved training as required. A review of ECE-TRIS found no additional training documentation for the staff member.
2. A staff member (DOH: 08/11/14) did not complete the required one and a half (1 ½) hours of pediatric abuse head trauma training. A review of ECE-TRIS found no additional training documentation for the staff member.
3. A staff member (DOH: 08/12/15) did not complete a total of fifteen (15) hours of approved training as required. A review of ECE-TRIS found that the staff member had obtained six (6) hours of training during the annual training year of 08/11/15-08/11/16. A review of ECE-TRIS found no additional training documentation for the staff member.
4. A staff member (DOH: 08/12/15) did not complete the required one and a half (1 ½) hours of pediatric abuse head trauma training. A review of ECE-TRIS found no additional training documentation for the staff member.
5. A staff member (DOH: 08/06/15) did not complete a total of fifteen (15) hours of approved training as required. A review of ECE-TRIS found no additional training documentation for the staff member.
6. A staff member (DOH: 08/06/15) did not complete the required six (6) hours of cabinet approved orientation training. A review of ECE-TRIS found no additional training documentation for the staff member.
7. A staff member (DOH: 04/06/15) did not complete the required one and a half (1 ½) hours of pediatric abuse head trauma training. A review of ECE-TRIS found no additional training documentation for the staff member.

Programming

In Compliance

Premises

In Compliance

Hygienic Practices

In Compliance

Inspection Report

First Aid/Medication

Not In Compliance

655 - First Aid Supplies

Not In Compliance

922 KAR 2:120. Section 7. First Aid and Medicine.

(1) First aid supplies shall:

- (a) Be available to provide prompt and proper first aid treatment;**
- (b) Be stored out of reach of a child;**
- (c) Be periodically inventoried to ensure the supplies are current;**
- (d) If reusable, be:**
 - 1. Sanitized; and**
 - 2. Maintained in a sanitary manner; and**
- (e) Include:**
 - 1. Liquid soap;**
 - 2. Adhesive bandages;**
 - 3. Sterile gauze;**
 - 4. Medical tape;**
 - 5. Scissors;**
 - 6. A thermometer;**
 - 7. Flashlight;**
 - 8. Cold pack;**
 - 9. First aid book;**
 - 10. Disposable gloves; and**
 - 11. A cardiopulmonary resuscitation mouthpiece protector.**

Findings:

General: Based on observation, the first aid kit did not contain a cardiopulmonary resuscitation mouthpiece protector as required by regulations. In an interview with the staff in charge, the surveyor was informed that she was not aware there was not a CPR mouthpiece protector in the first aid supplies and would get one to be placed in the kit.

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

Not Applicable

Food Service

In Compliance

Children's Records

Not In Compliance

1070 - Immunization

Not In Compliance

922 KAR 2:110. Section 3. 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, the surveyor found the following:

- 1. A child's (DOE: 07/13/16) file presented for review contained an immunization certificate that was not signed by a doctor and did not provide a date of when the next immunizations were due.
- 2. A child's (DOE: 08/09/16) file presented for review did not contain an immunization certificate.
- 3. A child's (DOE: 08/15/16) file presented for review did not contain an immunization certificate.
- 4. A child's (DOE: 08/10/16) file presented for review did not contain an immunization certificate.

1075 - Enrollment Information

Not In Compliance

922 KAR 2:110. Section 3. 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 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 situation 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:

1. A child's (DOE: 08/09/16) file presented for review did not contain a phone number for the preferred physician.
2. A child's (DOE: 08/09/16) file presented for review did not list a preferred hospital or phone number.
3. A child's (DOE: 08/15/16) file presented for review did not list a preferred hospital or phone number.
4. A child's (DOE: 08/10/16) file presented for review did not list a preferred hospital or phone number.
5. A child's (DOE: 09/26/16) file presented for review did not list a preferred hospital or phone number.

Written Documentation

Not In Compliance

1105 - Professional Development

Not In Compliance

922 KAR 2:110. Section 3. Records.

(1) A child-care center shall maintain:

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

Findings:

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

1. An employee's (DOH: 08/11/14) file presented for review did not contain a professional development plan.
2. An employee's (DOH: 08/12/15) file presented for review did not contain a professional development plan.
3. An employee's (DOH: 08/06/15) file presented for review did not contain a professional development plan.
4. An employee's (DOH: 04/06/15) file presented for review did not contain a professional development plan.
5. An employee's (DOH: 02/26/15) file presented for review did not contain a professional development plan.

Posted Documentation

Not In Compliance

1155 - Posting Requirements

Not In Compliance

922 KAR 2:110. Section 2. General.

(7) In addition to the posting requirement of KRS 199.898(3), a child-care center shall post the following in a conspicuous place and make available for public inspection:

(a) Each statement of deficiency and civil penalty notice issued by the cabinet during the current licensure year;

(b) Each plan of correction submitted by the child-care center to the cabinet during the current licensure year;

(c) Information on the Kentucky Consumer Product Safety Program and the program's website as specified in KRS 199.897;

(d) A description of services provided by the child-care center, including:

1. Current rates for child care; and

2. Each service charged separately and in addition to the basic rate for child care;

(e) Minimum staff-to-child ratios and group size established in 922 KAR 2:120; and

(f) Daily schedule.

Findings:

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

1. Statements of deficiencies and plans of corrections were not posted in a conspicuous place available to be inspected by the public.
2. Information on the Kentucky Consumer Product Safety Program and the program's website was not posted in a conspicuous place available to be inspected by the public.
3. The minimum staff-to-child ratios and group size were not posted in a conspicuous place available to be inspected by the public.

Signature of Provider/Representative

Title

Date