



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: 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 YMCA Boonesborough		Director(s): Whitson, Chelsea Nicole

Inspection Type: Renewal Application	Inspection Information	Inspection No: 305155
Date Initiated: 10/04/2021 1:38 PM	Date Concluded: 10/04/2021 3:27 PM	
	No. of Children Present: 5	

Inspection Report

Background Checks

Not In Compliance

5 - Background check/left alone/dismissed/relocated

Not In Compliance

922 KAR 2:280. Section 3. Implementation and Enforcement.

- (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.**
- (2) A child care staff member hired on or after April 1, 2018, shall:**
 - (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**
 - (b) 1. Have submitted to the background checks required in accordance with this administrative regulation;**
 - 2. Not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative regulation; and**
 - 3. Be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.**

Findings:

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

- 1. Staff person's (DOH: 12/03/2019) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service, a Criminal Records Check (CRC), or a Child Abuse/Neglect Check (CAN). Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check; therefore, the staff person was hired prior to clearance for employment. During interview, staff-in-charge stated she does not know if a background check was submitted through the Kentucky National Background Check Service. Staff-in-charge stated that she is unaware if staff person has worked alone with children.
- 2. Staff person's (DOH: 08/23/2021) file did not contain documentation of background checks submitted through the Kentucky National Background Check Service, a Criminal Records Check (CRC), or a Child Abuse/Neglect Check (CAN). Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check; therefore, the staff person was hired prior to clearance for employment. During interview, staff-in-charge stated she does not know if a background check was submitted through the Kentucky National Background Check Service. Staff-in-charge stated that she is unaware if staff person has worked alone with children.

Staff-in-charge reported that she would let the director know that staff persons listed above did not have background checks in their files or have a completed background check listed on KARES.

Supervision

In Compliance

Staffing Requirements

In Compliance

General Administration

In Compliance

Inspection Report

Director Requirements

Not In Compliance

360 - 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:

General: Based on review of documentation, the surveyor found that staff person's (DOH:12/03/2019) file did not contain a staff evaluation.

Staff-in-charge stated she would let the director know the staff person listed above did not have a staff evaluation.

Employee Records

Not In Compliance

395 - 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, the surveyor was not presented with staff person's (DOH: 05/27/2021) personnel file.

Staff-in-charge reported that staff person listed above file is not at the center; however, would have the director make a copy of staff person's (DOH: 05/27/2021) personnel file for the center.

400 - Educational Requirements

Not In Compliance

922 KAR 2:090. Section 11. 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 that staff person's (DOH: 05/27/2021) personnel file was not presented to the surveyor; therefore, the surveyor was unable to verify the staff person's documentation of education.

Staff-in-charge reported that staff person's (DOH: 05/27/2021) file is not at the center; however, she would have a copy of the staff person's personnel file at the center as soon as possible.

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 found the following:

1. Staff person's (DOH: 05/27/2021) file was not presented to the surveyor. The surveyor was not presented with a statement from a health professional that the individual was free of active tuberculosis or a copy of a negative tuberculin results for the staff person; therefore, the surveyor was unable to verify if the staff person was free from active tuberculosis.

Staff-in-charge reported that staff person's (DOH: 05/27/2021) file is not at the center; however, she would have a copy of the staff person's file at the center as soon as possible.

2. Staff person's (DOH:09/13/2019) file contained a copy of a negative tuberculin results dated for 10/02/2018; therefore, the staff person did not have record of a negative tuberculin result or a statement from a health professional that the individual was free of active tuberculosis every two (2) years after hire date.

Staff-in-charge reported that she would let the director know staff person (DOH: 09/13/2019) did not have documentation showing staff person was free of active tuberculosis.

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:

Based on review of documentation of ECE-TRIS, the surveyor learned the following:

1. A staff (DOH: 12/03/2019) obtained zero (0) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/20 - 06/30/21. Staff (DOH: 12/03/2019) is not listed on ECE- TRIS.
 2. A staff (DOH: 10/19/2018) obtained zero (0) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/20 - 06/30/21.
 3. A staff (DOH: 03/11/2020) obtained seven (7) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/20 - 06/30/21.
 4. A staff (DOH: 12/03/2019) has not obtain Pediatric Abusive Head Trauma (PAHT) training within the first year of employment. Staff (DOH: 12/03/2019) is not listed on ECE- TRIS.
 5. A staff (DOH: 12/03/19) has not obtain the required six (6) hours of cabinet approved orientation training within the first three (3) months of employment. Staff (DOH: 12/03/2019) is not listed on ECE- TRIS.
 6. A staff (DOH: 05/27/2021) has not obtain the required six (6) hours of cabinet approved orientation training within the first three (3) months of employment. Staff (DOH: 05/27/2021) is not listed on ECE- TRIS.
 7. A staff (DOH: 03/11/2020) has not obtain the required six (6) hours of cabinet approved orientation training within the first three (3) months of employment.
- Staff-in-charge reported that she would let the director know about the above staff person's training.

Programming

In Compliance

Premises

In Compliance

Hygienic Practices

In Compliance

First Aid/Medication

Not In Compliance

760 - 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 have not expired;
(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 surveyor found that the First Aid Kit was missing a CPR mouth piece and a flash light.

Staff-in-charge reported that she does not know where the CPR mouth piece or a flash light is located at the center.

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

Not Applicable

Kitchen Requirements

In Compliance

Inspection Report

Food Service

In Compliance

Meal Planning/Center Provides Meals

In Compliance

Meal Planning/Center Does Not Provide Meals

Not Applicable

Children's Records

Not In Compliance

1245 - Immunization

Not In Compliance

922 KAR 2:090. Section 9. 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. There were two (2) children's (DOE: 07/26/2021) files that did not contain an immunization certificate.
2. There was a child's (DOE: 08/16/2021) file did not contain an immunization certificate.
3. There was a child's (DOE: 08/03/2021) file did not contain an immunization certificate.
4. There was a child's (DOE: 07/29/2021) file did not contain an immunization certificate.
5. There was a child's (DOE: 07/08/2021) file did not contain an immunization certificate.

Staff-in-charge reported that she would let the director know about the children listed above immunization certificates were not in their file.

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:

1. There were two (2) children's (DOE: 08/05/2021) file did not list a preferred hospital or phone number.
2. There was a child's (DOE: 08/05/2021) file did not have a parent's signature.
3. There was a child's (DOE: 07/29/2021) file that did not list a doctor and phone number.

Staff-in-charge reported she would let the director know about the children listed above was missing information in their file.

Written Documentation

Not In Compliance

1275 - Staff Schedule

Not In Compliance

922 KAR 2:090. Section 9. Records.

(1) A child-care center shall maintain:

(d) A written schedule of staff working hours;

Findings:

General: Based on interview, staff-in-charge reported that the staff schedule is not wrote out at the center; however, the staff schedule is posted in a group on-line. Staff-in-charge stated that she was unable to show the staff schedule to the surveyor.

1280 - Professional Development

Not In Compliance

922 KAR 2:090. Section 9. 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 was presented with staff's (DOH: 03/11/2020) file that did not contain a professional development.

Staff reported that she would let the director know staff's (DOH: 03/11/2020) file did not contain a professional development.

1285 - 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, the surveyor was presented with a file of written earthquake, tornado, and fire drills and found the following:

1. The last earthquake and tornado drill that was documented was conducted on 4/15/2019; therefore, the surveyor was unable to verify that the earthquake and tornado drills were conducted quarterly.

2. The last fire drill that was documented was conducted on 01/22/2020; therefore, the surveyor was unable to verify that the fire drills were conducted monthly.

Staff-in-charge reported that the earthquake, tornado, and fire drills had been conducted; however, she is unsure where the drills documentation was located.

Posted Documentation

In Compliance

Animals

Not Applicable

Signature of Provider/Representative

Title

Date