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Inspection Report

Provider Name: LaFontaine Early Learning Center	Provider Information	CLR No: L383799
Provider Address: 220 Duncannon Lane, Richmond, KY, 40475	Provider Type: LICENSED TYPE I	Capacity: 181
Owner(s): Lafontaine Early Learning Center, Llc		Director(s): Kasitz, Elizabeth

Inspection Type: Renewal Application	Inspection Information	Inspection No: 321752
Date Initiated: 07/21/2022 1:16 PM	Date Concluded: 07/21/2022 4:30 PM	
	No. of Children Present: 88	

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 observation, the surveyor found the following:	
1. A staff's (DOH: 09/02/21) file contained documentation of background checks submitted through the Kentucky National Background Check Service on 09/08/21. Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check prior to being hired by the child-care center; therefore, the staff person was hired prior to clearance for employment.	
2. A staff's (DOH: 10/06/21) file contained documentation of background checks submitted through the Kentucky National Background Check Service on 10/12/21. Based on review of the Kentucky National Background Check Service, the staff member did not have a completed background check prior to being hired by the child-care center; therefore, the staff person was hired prior to clearance for employment.	
Staff-in-charge stated that both employees did not work alone with children until the results of the fingerprints were released to the child-care center.	
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 observation, the surveyor found the following:

1. In Room One's restroom, a toilet brush was placed beside the toilet and was accessible to the children.
2. In Room Two's restroom, a toilet brush was placed beside the toilet and was accessible to the children.
3. An electrical outlet was missing a protective cover beside a television in Room Two.
4. In Room Seven's restroom, a plunger and toilet brush were placed beside the toilet and was accessible to the children. One (1) electrical outlet was missing a protective cover in Room Seven's restroom.
5. In Room Seven, there was two (2) electrical outlets missing protective coverings and a loose cord hanging from a mounted television.

Based on the observations above, the health, safety, and comfort of the children were compromised.

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 observation, the surveyor found the following:

1. A staff's (DOH: 01/02/19) file contained an annual written performance evaluation dated for 12/20/20; therefore, the evaluation was not completed annually.
2. A staff's (DOH: 12/08/20) file contained an annual written performance evaluation that did not have a date; therefore, the surveyor was unable to determine if the evaluation was completed annually.

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 found two (2) staff's (DOH: 11/05/21 and 07/18/22) file did not contain documentation of a current TB skin test or a statement from a health professional stating that the adult was free from 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:

General: Based on review of documentation and review of ECE-Tris, the surveyor found the following:

1. The following staff (DOH: 12/08/20, 03/05/21, 04/19/21 and 01/18/21) obtained zero (0) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 – 06/30/22.
2. A staff (DOH: 01/02/19) obtained two (2) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
3. A staff (DOH: 09/03/18) obtained seven (7) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
4. The following staff (DOH: 01/02/19 and 11/11/20) obtained seven and one-half (7 1/2) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
5. A staff (DOH: 04/12/21) obtained eight and one-half (8 1/2) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
6. A staff (DOH: 05/16/18) obtained nine and one-half (9 1/2) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
7. A staff (DOH: 01/07/19) obtained ten (10) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
8. A staff (DOH: 09/25/20) obtained thirteen (13) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
9. A staff (DOH: 10/19/20) obtained fourteen and one-half (14 1/2) hours of the required fifteen (15) hours of cabinet-approved early care and education training for the review period 07/01/21 - 06/30/22.
10. The following staff (DOH: 12/08/20 and 04/19/21) file did not contain documentation of one and one-half (1 ½) hours of cabinet-approved pediatric abusive head trauma training; therefore, the training was not completed within one (1) year of employment.
11. Two (2) staff (DOH: 08/02/21 and 03/07/22) did not complete the required orientation training within their first three months of employment.

Programming

In Compliance

Premises

Not In Compliance

565 - Inaccessible Items

Not In Compliance

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

(7) The following shall be inaccessible to a child in care:
(a) Toxic cleaning supplies, poisons, and insecticides;
(b) Matches, cigarettes, lighters, and flammable liquids; and
(c) Personal belongings and medications of staff.

Findings:

General: Based on observation, the surveyor found the following:

1. A large bag of Miracle Grow Potting Mix was underneath a sink in Room One. The Miracle Grow Potting Mix had a label that read "Keep Out of Reach of Children."
 2. A container of Lysol was placed on the ground beside the trash can in Room One's restroom. The Lysol had a label that read "Keep Out of Reach of Children."
- The items listed above were accessible to the children.

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 two (2) ceiling tiles located in Room Four that contained water stains; therefore, the ceiling was not kept in good repair.

685 - Toilet Room

Not In Compliance

922 KAR 2:120. Section 12. Toilet, Diapering, and Toiletry Requirements.

- (2) A toilet room shall:**
- (a) 1. Be provided for each gender; or**
 - 2. A plan shall be implemented to use the same toilet room at separate times;**
 - (b) Have a supply of toilet paper; and**
 - (c) Be cleaned and disinfected daily.**

Findings:

General: Based on observation, the surveyor found the following:

- 1. Room One's restroom had toilet paper with one (1) dead bug placed on the floor; therefore, the restroom was not kept clean.
- 2. Room Two's restroom did not have toilet paper.
- 3. Room Seven's restroom did not have toilet paper.

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 the following:

- 1. Debris on two (2) diaper changing tables underneath the diaper changing pads in Room One.
- 2. Debris on the diaper changing table underneath the diaper changing pad in Room Two.
- 3. Debris on two (2) diaper changing tables underneath the diaper changing pads in Room Three.
- 4. Debris on the diaper changing table underneath the diaper changing pad in Room Four.
- 5. Debris on two (2) diaper changing tables underneath the diaper changing pads in Room Five.
- 6. Debris on two (2) diaper changing tables underneath the diaper changing pads in Room Six Coral.
- 7. Debris on the diaper changing table underneath the diaper changing pad in Room Seven.
- 8. Debris on the diaper changing table underneath the diaper changing pad in Room Nine Yellow.
- 9. Debris on the diaper changing table underneath the diaper changing pad in Room Nine Coral.

Therefore, the diaper changing surfaces were not kept clean.

First Aid/Medication

In Compliance

Outdoor Play Area

Not In Compliance

790 - Playground Clean

Not In Compliance

922 KAR 2:120. Section 4. Premises Requirements.

- (20) An outdoor play area shall be:**
- (c) Free from:**

- 1. Litter;**
- 2. Glass;**
- 3. Rubbish; and**
- 4. Flammable materials;**

Findings:

General: Based on observation, the surveyor found the following:

- 1. A torn plastic bag with garbage on top of the bag in the back right corner of the large playground.
- 2. Beside a yellow play structure, there was an empty McDonalds cup placed on the ground.
- 3. Beside the gate located in between the two (2) playgrounds, there was an empty Starbucks cup, one (1) empty bag of Cheez-It's and one (1) Strawberry Breakfast Bar wrapper placed on the ground.

Therefore, the playground was not kept in a clean condition.

795 - Playground Conditions

Not In Compliance

922 KAR 2:120. Section 4. Premises Requirements.

- (20) An outdoor play area shall be:**
(d) Safe from foreseeable hazard;
(e) Well drained;
(f) Well maintained;
(g) In good repair; and
(h) Visible to staff at all times.

Findings:

General: Based on observation, the surveyor found the following:

1. On the large playground, there was two (2) loose water hoses on the back patio; therefore, the playground was not safe from a foreseeable hazard.
2. On the small playground, there was two (2) black swings with loose chains and two (2) blue metal poles laying on the ground beside the shed; therefore, the playground was not safe from a foreseeable hazard.
3. On the small playground, there was a loose water hose on the ground; therefore, the playground was not safe from a foreseeable hazard.
4. On the small playground, there was a large hole in the ground that was holding approximately one (1) inch of water; therefore the playground was not well drained and not safe from a foreseeable hazard.
5. On the large playground, on the blue play structure area, the surveyor found four (4) tree limbs coming through the black liner underneath the mulch; therefore, the playground was not well maintained. Staff-in-charge stated that the playground is not used for the children because they are too small for the playground. Staff-in-charge has requested for the play structure to be removed, however the building is own by the City of Richmond and they will not have it removed.
6. An uncovered water table on the small playground that contained standing water; therefore, the equipment was not kept safe from hazard.

805 - Fence Construction

Not In Compliance

922 KAR 2:120. Section 4. Premises Requirements.

- (24) Fences shall be:**
(a) Constructed of safe material;
(b) Stable; and
(c) In good condition.

Findings:

General: Based on observation, the surveyor observed the large playground fence to have tree limbs coming through the fence, tree limbs coming over the fence, and brush sticking through the fence; therefore, the fence on the large playground was not kept in good condition.

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:

- 1. Two (2) children's (DOE: 03/28/22 and 08/17/21) files did not contain authorization by the parent for the child-care center to seek emergency medical care for the child in the parent's absence.
- 2. A child's (DOE: 03/28/22) file did not contain the name or contact telephone numbers for the child's preferred hospital.

Written Documentation

Not In Compliance

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 found the following:

- 1. A staff's (DOH: 09/02/14) file contained a professional development plan dated for 06/15/21; therefore, the plan was not completed annually.
- 2. A staff's (DOH: 05/16/18) file contained a professional development plan dated for 01/03/21; therefore, the plan was not completed annually.
- 3. Two (2) staff's (DOH: 01/02/19 and 12/08/20) files contained a professional development plan with no date; therefore, the surveyor was unable to determine if they were completed annually.

Posted Documentation

In Compliance

Animals

In Compliance

Signature of Provider/Representative

Title

Date