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Inspection Report

Provider Name: Grow & Learn Child Development Center of Berea, Inc.	Provider Information Provider Type: LICENSED TYPE I	CLR No: L357698
Provider Address: 183 & 185 Glades Road, Berea, KY, 40403		Capacity: 84
Owner(s): Grow and Learn Child Development Center of Berea, Inc.		Director(s): Anglin, Regina Carol

Inspection Type: Renewal Application	Inspection Information	Inspection No: 243351
Date Initiated: 02/12/2018 8:30 AM	Date Concluded: 02/12/2018 1:00 PM	
	No. of Children Present: 35	

Inspection Report	
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	Not In Compliance
265 - Health, Safety, Comfort	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: (I) Provide for the health, safety, and comfort of each child;	
Findings: General: Based on observation and interview, the surveyor found that one (1) electrical outlet located in the Three's Classroom did not have a protective covering. Staff stated that the outlet cover keeps getting pulled out of the outlet by the children.	

Inspection Report**Employee Records****Not In Compliance****300 - Background checks/left alone****Not In Compliance****922 KAR 2:090. Section 6. License Issuance.****(5) An individual described in subsection (4) of this section shall:****(a) Submit to background checks described in paragraph (b) of this subsection;****(b) May be employed or work with a child on a probationary basis for up to ninety (90) calendar days, pending completion of a:****1. Child abuse or neglect check using the central registry in accordance with 922 KAR 1:470;****2. Criminal records check required by KRS 199.896(19);****3. Criminal records check for any previous state of residence if the person resided outside the state of Kentucky in the last five (5) years; and****4. An address check of the Sex Offender Registry; and****(c) Not be left alone in the presence of a child until copies of the background checks in accordance with paragraph (b) of this subsection have been received by the licensee.****Findings:**

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

1. A staff file (DOH: 10/1/17) presented for review contained the results of a Criminal Records Background Check and a Child Abuse and Neglect Background Check that were submitted on 10/13/17. The Criminal Records and Child Abuse and Neglect Background Check were not submitted timely.

2. A staff file (DOH: 11/1/17) presented for review contained the results of a Criminal Records Background Check and a Child Abuse and Neglect Background Check that were submitted on 11/21/2017. The Criminal Records and Child Abuse and Neglect Background Check were not submitted timely.

Upon interview, the Director reported that she was aware of the untimely submission of the background checks and that the staff members had not worked alone with children until the results were received.

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, review of ECE-TRIS, and interview, the following were found:

1. A staff file (DOH: 06/24/16) presented for review contained documentation of only seven (7) hours of annual training instead of the required fifteen (15) hours for 6/24/16 - 6/23/17. Review of ECE-TRIS confirmed that only seven (7) hours of annual training had been completed.

2. A staff file (DOH: 10/06/16) presented for review contained documentation of only eleven (11) hours of annual training instead of the required fifteen (15) hours for 10/06/16 - 10/05/17. Review of ECE-TRIS confirmed that only eleven (11) hours of annual training had been completed.

3. A staff file (DOH: 5/3/17) presented for review contained documentation of six (6) hours of state required orientation being completed on 10/14/17. Review of ECE-TRIS confirmed that orientation training was completed on 10/14/17; therefore, orientation was not completed within the required time frame.

Upon interview, the Director was not aware of the deficiencies in regards to staff training.

Programming**In Compliance****Premises****Not In Compliance****520 - 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 and interview, the following were found:

1. There were three (3) places on the walls in the Pre-K Classroom where the paint had peeled off of the wall.

2. The butterfly restroom had paint peeling off of the wall above the base board by the toilet.

The Director acknowledged that she was aware of the peeling paint.

Inspection Report	
Hygienic Practices	Not In Compliance
625 - Diaper Changing Area/Surface	Not In Compliance
922 KAR 2:120. Section 10. 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 and interview, the surveyor found that the changing table located in the restroom by the office was soiled with dirt and debri. The Director stated that staff are supposed to clean the changing table after each time it is used.	
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 and interview, the surveyor found that the first aid kit was missing sterile gauze, a cold pack, and a first aid book. The Director stated that she was not aware that the items were missing from the first aid kit.	
Outdoor Play Area	Not In Compliance
685 - 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 and interview, the surveyor found two (2) plastic water bottles on the School-Age playground. Staff stated that the bottles must have been left on the playground the last time that the children were taken outside.	
695 - Protective Surface	Not In Compliance
922 KAR 2:120. Section 4. Premises Requirements. (21) A protective surface shall: (a) Be provided for outdoor play equipment used to: 1. Climb; 2. Swing; and 3. Slide; and (b) Have a fall zone equal to the height of the equipment.	
Findings: General: Based on observation and interview, the surveyor found that the wood climbing/slide structure located on the School-Age playground was located up against the fence; therefore, there was not a fall zone equal to the height of the structure on one (1) side. Upon interview, the Director was aware of the structures location and that it did not have an adequate fall zone.	

Inspection Report	
Equipment	Not In Compliance
730 - Crib/Mattress/Sheet	Not In Compliance
922 KAR 2:120. Section 6. Sleeping and Napping Requirements. (3) Rest time shall include adequate space specified by the child's age as follows: (a) For an infant: 1. An individual non-tiered crib that meets Consumer Product Safety Commission standards established in 16 C.F.R. 1219-1220; 2. A firm crib mattress in good repair with a clean tight-fitted sheet that shall be changed: a. Weekly; or b. Immediately if it is soiled or wet;	
Findings: General: Based on observation and interview, the surveyor found that the crib located in the corner by the mini refrigerator in the Wobbler Classroom was soiled. The soiled portion of the sheet was dry and stiff. Staff reported that they were only providing a break to the regular teacher for the Wobbler Classroom.	
760 - Indoor/Outdoor Equipment	Not In Compliance
922 KAR 2:120. Section 11. Toys and Furnishings. (2) Indoor and outdoor equipment shall: (a) Be clean, safe, and in good repair; (b) Meet the physical, developmental needs, and interests of children of different age groups; (c) Be free from sharp points or corners, splinters, protruding nails or bolts, loose or rusty parts, hazardous small parts, lead-based paint, poisonous material, and flaking or chalking paint; and (d) Be designed to guard against entrapment or situations that may cause strangulation.	
Findings: General: Based on observation and interview, the surveyor found that the Little Tikes climber and slide located on the School-Age Playground had a piece that was broken off creating sharp edges and exposing a screw which was protruding from the structure. Upon interview, the Director was aware of the damaged equipment.	
Transportation	In Compliance
Food Service	Not In Compliance
935 - Refrigerator	Not In Compliance
922 KAR 2:120. Section 8. Kitchen Requirements. (4) A cold-storage facility used for storage of perishable food in a nonfrozen state shall: (a) Have an indicating thermometer or other appropriate temperature measuring device; (b) Be in a safe environment for preservation; and (c) Be forty (40) degrees Fahrenheit or below.	
Findings: General: Based on observation and interview, the surveyor found that the mini refrigerator located in the Wobbler Classroom did not contain a thermometer; therefore, the surveyor could not determine if the refrigerator was being maintained at the required temperature of forty (40) degrees fahrenheit or below. Staff were not aware that there was not a thermometer in the refrigerator.	
940 - Frozen Food	Not In Compliance
922 KAR 2:120. Section 8. Kitchen Requirements. (5) Frozen food shall be: (a) Kept at a temperature of zero degrees Fahrenheit or below; and (b) Thawed: 1. At refrigerator temperatures; 2. Under cool, potable running water; 3. As part of the cooking process; or 4. By another method in accordance with the Department of Public Health's food safety standards and permits, established in KRS Chapter 217.	
Findings: General: Based on observation and interview, the surveyor found that the freezer did not contain a thermometer; therefore, the surveyor could not determine if the freezer temperature was being maintained at the required zero (0) degrees fahrenheit or less. The Director stated that she was aware that the freezer did not contain a thermometer.	

Inspection Report

950 - Kitchen Equipment Clean and Sanitary

Not In Compliance

922 KAR 2:120. Section 8. Kitchen Requirements.

(7) The following shall be clean and sanitary:

- (a) Eating and drinking utensils;
- (b) Kitchenware;
- (c) Food contact surfaces of equipment;
- (d) Food storage utensils;
- (e) Food storage containers;
- (f) Cooking surfaces of equipment; and
- (g) Nonfood contact surfaces of equipment.

Findings:

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

1. The top of the cooking range and the front of the cooking range were soiled with food debris and spilled substances.
2. The inside of the oven was not clean as it had a significant amount of burnt food debris in it.

Upon interview, staff stated they were not normally working in the kitchen and not aware of how often the range or oven are cleaned.

Children's Records

In Compliance

Written Documentation

In Compliance

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 interview, the surveyor found that the last deficiency statement/plan of correction posted in the center was for the renewal inspection completed in February of 2016. There were not deficiency statements/plan of corrections posted from 2017. Upon interview, the Director stated the deficiency statements/plans of corrections for 2017 must have been removed by mistake.

Animals

In Compliance

Signature of Provider/Representative

Title

Date