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Inspection Report

Provider Name: The Centenary School	Provider Information	CLR No: L353863
Provider Address: 2800 Tates Creek Road, Lexington, KY, 40502	Provider Type: LICENSED TYPE I	Capacity: 319
Owner(s): Centenary United Methodist Church, Inc.		Director(s): Hacker, Tobia Michelle

Inspection Type: Renewal Application	Inspection Information	Inspection No: 318748
Date Initiated: 10/05/2021 9:40 AM	Date Concluded: 10/05/2021 1:40 PM	
	No. of Children Present: 161	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	In Compliance
Employee Records	Not In Compliance

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, found two staff who did not have a copy of a high school diploma, GED or other qualified documentation on file at the facility. The dates of hire for the two staff are 8/5/2021 and 9/22/2021.

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 following was found:

1. A staff person hired 1/3/08, had the results of a TB skin test read 8/30/2019. This exceeds the two-year timeframe.
2. A staff person hired 8/5/2021 and a staff person hired 9/7/2021, did not have the results of a negative TB skin test or a statement from a health professional indicating the individual is free from the symptoms of TB.

Inspection Report

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, found there were 14 staff who did not have CPR/First Aid training. The dates of hire for these staff are as follows: 11/23/1993, 8/23/2007, 10/26/2010, 7/22/2015, 3/19/2018, 6/1/2018, 5/28/2019, 10/5/2020, 8/21/2020, 8/24/2020 (2 staff), 10/15/2020, 10/26/2020 and 4/12/2021.

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 following was found:

1. There were 36 staff who did not complete 15 hours of cabinet approved annual training.
2. A staff member hired on 8/6/2015, completed PAHT training on 9/28/2016; however, did not renew the training due 9/28/2021.
3. Two staff members hired on 8/24/2020, did not complete the required PAHT training. These staff members have been employed for more than one year.
4. A staff member hired 1/19/2021, did not complete the required Orientation training. This staff member has been employed for more than three months.

A review of ECE-TRIS confirmed these findings.

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, this regulatory requirement was not met. The bathrooms in the following classrooms contained dusty ceiling vents: Room 145, Room 152, Room 153, Room 154, Room 155, and Room 156. In addition, the girl's bathroom, located in the hallway upstairs, contained a dusty vent in the ceiling over the diaper changing table.

605 - Building Requirements

Not In Compliance

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

(5) The building shall be constructed to ensure the:

- (a) Building is:**
 - 1. Dry;**
 - 2. Ventilated; and**
 - 3. Well lit, including clean light fixtures that are:**
 - a. In good repair in all areas; and**
 - b. Shielded or have shatter-proof bulbs installed; and**
- (b) Following are protected:**

- 1. Windows;**
- 2. Doors;**
- 3. Stoves;**
- 4. Heaters;**
- 5. Furnaces;**
- 6. Pipes; and**
- 7. Stairs.**

Findings:

General: Based on observation, this regulatory requirement was not met. The bathroom in Room 153 contained an exposed florescent light bulb over the hand washing sink. The light bulb was uncovered and not shatter-proof.

Hygienic Practices

In Compliance

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance

Equipment

In Compliance

Inspection Report

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
Children's Records	In Compliance
Written Documentation	In Compliance
Posted Documentation	Not In Compliance

1310 - Posting Requirements **Not In Compliance**

922 KAR 2:090. Section 8. General.
(6) 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) The provider's preliminary or regular license;
(b) Each statement of deficiency and civil penalty notice issued by the cabinet during the current licensure year;
(c) Each plan of correction submitted by the child-care center to the cabinet during the current licensure year;
(d) Information on the Kentucky Consumer Product Safety Program and the program's Web site as specified in KRS 199.897;
(e) 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;
(f) Minimum staff-to-child ratios and group size established in 922 KAR 2:120; and
(g) Daily planned program.

Findings:

General: Based on observation, this regulatory requirement was not met. The statement of deficiency and plan of correction from an investigation conducted on 3/05/2021, was not posted for public inspection.

1325 - Daily Activities **Not In Compliance**

922 KAR 2:090. Section 10. Director Requirements and Responsibilities.
(1) A director shall:
(h) Post a schedule of daily activities, to include dates and times of activities to be conducted with the children in each classroom;

Findings:

General: Based on observation, this regulatory requirement was not met. Room 144 did not have a posted daily schedule.

Animals **In Compliance**

Signature of Provider/Representative

Title

Date