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Inspection Report

Provider Name: Our Lady of the Mountains Preschool	Provider Information	CLR No: L354145
Provider Address: 405 Third Street, Paintsville, KY, 41240	Provider Type: LICENSED TYPE I	Capacity: 64
Owner(s): Catholic Diocese Of Lexington		Director(s): Andrews, Lorna M

Inspection Type: Renewal Application	Inspection Information	Inspection No: 247614
Date Initiated: 03/25/2019 12:54 PM	Date Concluded: 03/25/2019 2:30 PM	
	No. of Children Present: 17	

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

345 - 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 presented for review, the surveyor found the following:

1. Staff (DOH: 08/01/16) file did not contain an annual written performance evaluation.
2. Staff (DOH: 10/20/17) file did not contain an annual written performance evaluation.

During interview with the director, it was confirmed that the documents were not in the files.

Inspection Report

Employee Records

Not In Compliance

390 - 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 presented for review, the surveyor found the following:

- 1. An employee (DOH: 02/12/19) record presented for review did not contain evidence of educational qualification.
- 2. An employee (DOH: 11/13/18) record presented for review did not contain evidence of educational qualification.

During interview with the director, it was confirmed that the documents were not in the files.

395 - 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 was presented with a file for one (1) staff member (DOH: 08/01/16) that did not contain a copy of a negative tuberculin result or a statement from a health professional that the individual was free of active tuberculosis. Through interview with the director, it was confirmed that the statement was not present in the file.

410 - 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 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 cabinet-approved 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 cabinet-approved pediatric abusive head trauma training completed once every five (5) years.

Findings:

General: Based on review of documentation and ECE-TRIS, the files presented to the surveyor found the following:

- 1. No verification that two (2) staff (DOH: 02/02/18) and (DOH: 10/20/17) had completed Pediatric Abusive Head Trauma Training within the first year of employment.
- 2. Verification that one (1) staff (DOH: 02/02/18) had obtained only nine (9) hours of cabinet-approved early care and education annual training.
- 3. Verification that one (1) staff (DOH: 10/20/17) had obtained only thirteen (13) hours of cabinet-approved early care and education annual training.
- 4. No verification that four (4) staff (DOH: 11/13/18), (DOH: 10/18/18), (DOH: 02/02/18) and (DOH: 10/20/17) had obtained six (6) hours of cabinet-approved orientation training within the first three (3) months of employment.

Programming

In Compliance

Premises

Not In Compliance

520 - 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 a bottle of Dawn dish detergent, which was marked "Keep Out of Reach of Children", on the sink in the Early Learning Center room where the children wash their hands; therefore, the bottle was accessible to the children.

Hygienic Practices

In Compliance

First Aid/Medication

In Compliance

Outdoor Play Area

In Compliance

Equipment

In Compliance

Transportation

In Compliance

Food Service/Food Program

In Compliance

Inspection Report

**Food Service
Children's Records**

**In Compliance
Not In Compliance**

1135 - 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 of files presented to the surveyor for review, the following was found:

1. The most recent immunization certificate presented for surveyor review for one (1) child (DOE: 05/20/18) was no longer current after 12/14/18.
2. The most recent immunization certificate presented for surveyor review for one (1) child (DOE: 05/21/18) was no longer current after 12/02/18.
3. The most recent immunization certificate presented for surveyor review for one (1) child (DOE: 07/23/18) was no longer current after 02/09/19.

1140 - 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 of the files presented to the surveyor for review, the following was found:

1. The file for a child (DOE: 08/06/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
2. The file for a child (DOE: 05/20/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
3. The file for a child (DOE: 08/29/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
4. The file for a child (DOE: 05/21/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
5. The file for a child (DOE: 07/23/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
6. The file for a child (DOE: 03/15/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
7. The file for a child (DOE: 07/30/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
8. The file for a child (DOE: 07/17/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
9. The file for a child (DOE: 08/03/18) did not contain contact information to enable a person in charge to contact their preferred hospital.
10. The file for a child (DOE: 06/05/18) did not contain contact information to enable a person in charge to contact their preferred hospital.

Written Documentation

Not In Compliance

1175 - 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 binder designated for documentation of practiced earthquake, tornado, and fire drills; however, the surveyor found that the documentation did not contain drills practiced after 09/15/18. Based upon interview, the director stated that all drills have been completed but they were not in the file; therefore, a written record of the practiced earthquake, tornado, or fire drills could not be verified.

1195 - Fire Drills

Not In Compliance

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

(12) A fire drill shall be:

- (a) Conducted during hours of operation at least monthly; and
- (b) Documented.

(13) An earthquake drill and a tornado drill shall be:

- (a) Conducted during hours of operation at least quarterly; and
- (b) Documented.

Findings:

General: Based on review of documentation, the surveyor was presented with a binder designated for documentation of practiced earthquake, tornado, and fire drills; however, the surveyor found that the documentation did not contain drills practiced after 09/15/18. Based upon interview, the director stated that all drills have been completed but they were not in the file; therefore, it could not be verified that the practiced earthquake, tornado, or fire drills had been conducted and/or documented.

Posted Documentation

In Compliance

Animals

In Compliance

Signature of Provider/Representative

Title

Date