



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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SECRETARY

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Inspection Report

Provider Name: Kare Bears	Provider Information	CLR No: L383160
Provider Address: 1697 Peabody Way, Lexington, KY, 40511	Provider Type: LICENSED TYPE I	Capacity: 60
Owner(s): Peh, Inc.		Director(s): Harshman, Ellen V.

Inspection Type: Investigation	Inspection Information	Inspection No: 241897
Date Initiated: 09/19/2017 9:19 AM	Date Concluded: 09/19/2017 9:42 AM	
	No. of Children Present: 25	

Inspection Report		
Staffing Requirements		In Compliance
General Administration		In Compliance
Director Requirements		In Compliance
Employee Records		In Compliance

Signature of Provider/Representative

Title

Date