



**CABINET FOR HEALTH AND FAMILY SERVICES  
OFFICE OF INSPECTOR GENERAL**

**Andy Beshear**  
Governor

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**Division of Regulated Child Care**  
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**Eric C. Friedlander**  
Secretary

**Adam Mather**  
Inspector General

**Inspection Report**

|                                                                             |                                                                      |                                         |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------------|
| <b>Provider Name:</b> Fern Creek Elementary Childcare<br>Enrichment Program | <b>Provider Information</b><br><b>Provider Type:</b> LICENSED TYPE I | <b>CLR No:</b> L355397                  |
| <b>Provider Address:</b> 8815 Ferndale Road, Louisville, KY, 40291          |                                                                      | <b>Capacity:</b> 100                    |
| <b>Owner(s):</b> The Young Mens Christian Association Of Greater Louisville |                                                                      | <b>Director(s):</b> Slaten, Valerie Rae |

|                                             |                                           |                              |
|---------------------------------------------|-------------------------------------------|------------------------------|
| <b>Inspection Type:</b> Renewal Application | <b>Inspection Information</b>             | <b>Inspection No:</b> 290719 |
| <b>Date Initiated:</b> 08/26/2019 2:30 PM   | <b>Date Concluded:</b> 08/26/2019 4:15 PM |                              |
|                                             | <b>No. of Children Present:</b> 40        |                              |

| <b>Inspection Report</b>         |  |                      |
|----------------------------------|--|----------------------|
| <b>Background Checks</b>         |  | <b>In Compliance</b> |
| <b>Supervision</b>               |  | <b>In Compliance</b> |
| <b>Staffing Requirements</b>     |  | <b>In Compliance</b> |
| <b>General Administration</b>    |  | <b>In Compliance</b> |
| <b>Director Requirements</b>     |  | <b>In Compliance</b> |
| <b>Employee Records</b>          |  | <b>In Compliance</b> |
| <b>Programming</b>               |  | <b>In Compliance</b> |
| <b>Premises</b>                  |  | <b>In Compliance</b> |
| <b>Hygienic Practices</b>        |  | <b>In Compliance</b> |
| <b>First Aid/Medication</b>      |  | <b>In Compliance</b> |
| <b>Outdoor Play Area</b>         |  | <b>In Compliance</b> |
| <b>Equipment</b>                 |  | <b>In Compliance</b> |
| <b>Transportation</b>            |  | <b>In Compliance</b> |
| <b>Food Service/Food Program</b> |  | <b>In Compliance</b> |
| <b>Food Service</b>              |  | <b>In Compliance</b> |
| <b>Children's Records</b>        |  | <b>In Compliance</b> |
| <b>Written Documentation</b>     |  | <b>In Compliance</b> |
| <b>Posted Documentation</b>      |  | <b>In Compliance</b> |
| <b>Animals</b>                   |  | <b>In Compliance</b> |

Signature of  
Provider/Representative

Title

Date