



Andy Beshear
GOVERNOR

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

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Inspection Report

Provider Name: Charlotte's Web Preschool and Nursery Provider Address: 4129 Vincent Station Drive, Owensboro, KY, 42303 Owner(s): CHARLOTTE'S WEB PRE-SCHOOL & NURSERY, LLC	Provider Information Provider Type: LICENSED TYPE I	CLR No: L383382 Capacity: 123(Bldg 1: 120) Director(s): Millay, Monti Gail
Inspection Type: Investigation Date Initiated: 12/14/2016 1:52 PM	Inspection Information Date Concluded: 12/14/2016 3:15 PM No. of Children Present:	Inspection No: 218017

Inspection Report	
Supervision	In Compliance
Staffing Requirements	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: Based on interviews with staff and observation of a video dated 11-17-16 a caregiver grabbed a child's right arm in an attempt to prevent the child from hitting another child. The child leaned backwards and appeared to pull away from the caregiver as the caregiver held the child's hand and wrist and let the child lie down on the floor. After this incident, the child refused to use his right arm. The child received medical treatment and was diagnosed with Nursemaid's Elbow.	
Employee Records	In Compliance
Programming	In Compliance
Children's Records	Not In Compliance
1070 - Immunization	Not In Compliance
922 KAR 2:110. Section 3. 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 a review of documentation, a child enrolled 8-1-16 did not have an immunization certificate on file.	

Signature of Provider/Representative

Title

Date