



Andy Beshear
GOVERNOR

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

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SECRETARY

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INSPECTOR GENERAL

Inspection Report

Provider Name: Olive Hill Head Start	Provider Information	License No: L352263
Provider Address: 21039 W. Us Hwy 60, Olive Hill, KY, 41164	Provider Type: LICENSED TYPE I	Capacity: 80
Owner(s): Northeast Kentucky Community Action Agency, Inc.		Director(s): Hammond, Alyce Faye

Inspection Type: Investigation	Inspection Information	Inspection No: 192729
Visit Start Date: 09/30/2015 3:55 PM	Visit End Date: 09/30/2015 4:00 PM	
	No. of Children Present:	

Inspection Report	
General Administration	
140 - Staff Conviction/Substantiation	In Compliance
<p>922 KAR 2:110. Section 5. Staff Requirements.</p> <p>(2) A child-care center shall not employ a person:</p> <p>(a) Convicted of, or who entered an Alford or guilty plea to, a crime pursuant to 922 KAR 2:090, Section 6(6);</p> <p>(b) Found by the cabinet to have abused or neglected a child, pursuant to 922 KAR 1:470;</p> <p>(c) Placed on the Sex Offender Registry; or</p> <p>(d) Determined by a physician to have a health condition that renders the person unable to care for children.</p>	

Signature of
Provider/Representative

Title

Date