



Andy Beshear
GOVERNOR

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

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Inspection Report

| | | |
|--|---------------------------------|-----------------------|
| Provider Name: Whitaker, June Marcella | Provider Information | CLR No: C70987 |
| Provider Address: 250 Ready Mix Rd., Harland, KY, 40831 | Provider Type: CERTIFIED | Capacity: 12 |

| | | |
|---|--|------------------------------|
| Inspection Type: Initial Application | Inspection Information | Inspection No: 218813 |
| Date Initiated: 02/13/2017 10:35 AM | Date Concluded: 02/13/2017 11:30 AM | |
| No. of Children Enrolled: 7 | No. of Children Present: 2 | |

| Inspection Report | |
|------------------------|----------------|
| Supervision | Discussed |
| General Administration | In Compliance |
| Provider Requirements | In Compliance |
| Provider Records | In Compliance |
| Programming | In Compliance |
| Premises | In Compliance |
| Hygienic Practices | In Compliance |
| First Aid/Medication | In Compliance |
| Outdoor Play Area | In Compliance |
| Equipment | In Compliance |
| Transportation | Not Applicable |
| Food Service | In Compliance |
| Children's Records | Discussed |
| Written Documentation | In Compliance |
| Posted Documentation | In Compliance |
| Animals | In Compliance |
| Posted Requirements | In Compliance |

Signature of Provider/Representative

Title

Date