



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
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Inspection Report

Provider Name: Kline, Susan Alice	Provider Information Provider Type: CERTIFIED	CLR No: C0812
Provider Address: 3840 Walhampton Drive, Lexington, KY, 40517, 1639		Capacity: 6

Inspection Type: Annual Inspection	Inspection Information	Inspection No: 293845
Date Initiated: 07/10/2020 9:30 AM	Date Concluded: 07/10/2020 10:30 AM	
No. of Children Enrolled: 6	No. of Children Present: 6	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
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/Food Program	Not Applicable
Food Service	In Compliance
Children's Records	In Compliance
Written Documentation	In Compliance
Posted/Available Documentation	In Compliance
Animals	In Compliance
Posted Requirements	In Compliance

Signature of Provider/Representative

Title

Date