



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Name: Mayking Head Start	Provider Information	CLR No: L350589
Provider Address: 15 Highway 3410, Mayking, KY, 41837	Provider Type: LICENSED TYPE I	Capacity: 57
Owner(s): Leslie, Knott, Letcher, Pery Counties Head Start Program, Incorporated		Director(s): Sexton, Hazel Renee

Inspection Type: Renewal Application	Inspection Information	Inspection No: 306689
Date Initiated: 04/15/2021 9:38 AM	Date Concluded: 04/15/2021 12:30 PM	
	No. of Children Present:	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	In Compliance
Director Requirements	In Compliance
Employee 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	In Compliance
Food Service/Food Program	In Compliance
Food Service	In Compliance
Children's Records	In Compliance
Written Documentation	In Compliance
Posted Documentation	In Compliance
Animals	Not Applicable
Emergency Regulation	In Compliance

Signature of Provider/Representative

Title

Date