



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Name: Rockcastle Hospital Child Development Center	Provider Information Provider Type: LICENSED TYPE I	CLR No: L358846
Provider Address: 145 Newcomb Avenue, Mt. Vernon, KY, 40456		Capacity: 60
Owner(s): Rockcastle Hospital And Respiratory Care Center, Inc.		Director(s): Burdette, Twila Carol

Inspection Type: Investigation	Inspection Information	Inspection No: 292324
Date Initiated: 06/25/2020 12:18 PM	Date Concluded: 06/25/2020 2:00 PM	
	No. of Children Present: 30	

Inspection Report		
Director Requirements		In Compliance

Signature of Provider/Representative

Title

Date