



**Andy Beshear**  
GOVERNOR

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

**Eric Friedlander**  
SECRETARY

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**Adam Mather**  
INSPECTOR GENERAL

**Inspection Report**

|                                                                  |                                       |                                          |
|------------------------------------------------------------------|---------------------------------------|------------------------------------------|
| <b>Provider Name:</b> The Children's House of Hebron             | <b>Provider Information</b>           | <b>CLR No:</b> L358943                   |
| <b>Provider Address:</b> 2151 North Bend Road, Hebron, KY, 41048 | <b>Provider Type:</b> LICENSED TYPE I | <b>Capacity:</b> 240                     |
| <b>Owner(s):</b> The Children's House Of Hebron, Llc             |                                       | <b>Director(s):</b> Watters, Holly Renee |

|                                            |                                            |                              |
|--------------------------------------------|--------------------------------------------|------------------------------|
| <b>Inspection Type:</b> Investigation      | <b>Inspection Information</b>              | <b>Inspection No:</b> 242490 |
| <b>Date Initiated:</b> 10/20/2017 10:00 AM | <b>Date Concluded:</b> 10/20/2017 11:00 AM |                              |
|                                            | <b>No. of Children Present:</b> 101        |                              |

| <b>Inspection Report</b>      |  |                      |
|-------------------------------|--|----------------------|
| <b>General Administration</b> |  | <b>In Compliance</b> |
| <b>Director Requirements</b>  |  | <b>In Compliance</b> |
| <b>Employee Records</b>       |  | <b>In Compliance</b> |

Signature of Provider/Representative

Title

Date