



**Andy Beshear**  
GOVERNOR

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

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**Eric Friedlander**  
SECRETARY

**Adam Mather**  
INSPECTOR GENERAL

**Inspection Report**

|                                                                      |                                       |                                          |
|----------------------------------------------------------------------|---------------------------------------|------------------------------------------|
| <b>Provider Name:</b> Kid's Time                                     | <b>Provider Information</b>           | <b>CLR No:</b> L354512                   |
| <b>Provider Address:</b> 4600 Lynnbrook Drive, Louisville, KY, 40220 | <b>Provider Type:</b> LICENSED TYPE I | <b>Capacity:</b> 99                      |
| <b>Owner(s):</b> Church of the Ascension                             |                                       | <b>Director(s):</b> Shell, Valerie Glynn |

|                                             |                                           |                              |
|---------------------------------------------|-------------------------------------------|------------------------------|
| <b>Inspection Type:</b> Renewal Application | <b>Inspection Information</b>             | <b>Inspection No:</b> 246706 |
| <b>Date Initiated:</b> 11/13/2018 10:50 AM  | <b>Date Concluded:</b> 11/13/2018 1:05 PM |                              |
|                                             | <b>No. of Children Present:</b> 31        |                              |

| <b>Inspection Report</b>         |  |                      |
|----------------------------------|--|----------------------|
| <b>Background Checks</b>         |  | <b>In Compliance</b> |
| <b>Supervision</b>               |  | <b>In Compliance</b> |
| <b>Staffing Requirements</b>     |  | <b>In Compliance</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> |
| <b>Programming</b>               |  | <b>In Compliance</b> |
| <b>Premises</b>                  |  | <b>In Compliance</b> |
| <b>Hygienic Practices</b>        |  | <b>In Compliance</b> |
| <b>First Aid/Medication</b>      |  | <b>In Compliance</b> |
| <b>Outdoor Play Area</b>         |  | <b>In Compliance</b> |
| <b>Equipment</b>                 |  | <b>In Compliance</b> |
| <b>Transportation</b>            |  | <b>In Compliance</b> |
| <b>Food Service/Food Program</b> |  | <b>In Compliance</b> |
| <b>Food Service</b>              |  | <b>In Compliance</b> |
| <b>Children's Records</b>        |  | <b>In Compliance</b> |
| <b>Written Documentation</b>     |  | <b>In Compliance</b> |
| <b>Posted Documentation</b>      |  | <b>In Compliance</b> |
| <b>Animals</b>                   |  | <b>In Compliance</b> |

Signature of Provider/Representative

Title

Date