



Andy Beshear
GOVERNOR

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

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SECRETARY

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Adam Mather
INSPECTOR GENERAL

Inspection Report

Provider Name: Tammy Madison - Circle of Friends	Provider Information	CLR No: L359179
Provider Address: 1133 Parklawn Drive, Lexington, KY, 40517	Provider Type: LICENSED TYPE II	Capacity: 12
Owner(s): Tammy Madison – Circle of Friends		Director(s): Madison, Tammy Sue

Inspection Type: Renewal Application	Inspection Information	Inspection No: 243017
Date Initiated: 12/13/2017 8:30 AM	Date Concluded: 12/13/2017 9:45 AM	
	No. of Children Present: 9	

Inspection Report	
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	Not Applicable
Food Service	In Compliance
Children's Records	In Compliance
Written Documentation	In Compliance
Posted Documentation	In Compliance
Animals	In Compliance

Signature of Provider/Representative

Title

Date