



**Andy Beshear**  
GOVERNOR

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

**Melissa A. Moore, Director**  
Division of Regulated Child Care  
Southern Branch  
116 Commerce Ave  
London, KY 40744  
Phone: (606) 330-2030 Fax: (606) 330-2056  
<https://chfs.ky.gov/agencies/os/oig>

**Eric Friedlander**  
SECRETARY

**Adam Mather**  
INSPECTOR GENERAL

**Inspection Report**

|                                                                     |                                       |                                            |
|---------------------------------------------------------------------|---------------------------------------|--------------------------------------------|
| <b>Provider Name:</b> South Irvine P-K Center                       | <b>Provider Information</b>           | <b>CLR No:</b> L377139                     |
| <b>Provider Address:</b> 1000 South Irvine Drive, Irvine, KY, 40336 | <b>Provider Type:</b> LICENSED TYPE I | <b>Capacity:</b> 20                        |
| <b>Owner(s):</b> Estill County Board Of Education                   |                                       | <b>Director(s):</b> Riddell, Melissa Marie |

|                                             |                                            |                              |
|---------------------------------------------|--------------------------------------------|------------------------------|
| <b>Inspection Type:</b> Renewal Application | <b>Inspection Information</b>              | <b>Inspection No:</b> 244200 |
| <b>Date Initiated:</b> 05/04/2018 10:53 AM  | <b>Date Concluded:</b> 05/04/2018 12:15 PM |                              |
|                                             | <b>No. of Children Present:</b> 7          |                              |

| <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>Not Applicable</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