



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Name: Lost River After-School Program	Provider Information	License No: L355543
Provider Address: 450 Modern Way, Bowling Green, KY, 42101	Provider Type: LICENSED TYPE I	Capacity: 75
Owner(s): Bowling Green - Warren County Community Education		Director(s): Manley, Karen

Inspection Type: Investigation	Inspection Information	Inspection No: 41860
Visit Start Date: 08/22/2013 10:30 AM	Visit End Date: 08/22/2013 12:00 PM	
No. of Children Present:		

Inspection Report

General Administration

115 - Reports to Cabinet **Not In Compliance**

922 KAR 2:110. Reports.

- (1) The following shall be reported to the cabinet or designee and other agencies specified in this section within twenty-four (24) hours from the time of discovery:**
- (a) Communicable disease, which shall also be reported to the local health department pursuant to KRS 214.010;**
 - (b) An accident or injury to a child that requires medical care;**
 - (c) An incident that results in legal action by or against the child-care center that affects a child or staff person;**
 - (d) An incident involving fire or other emergency; or**
 - (e) A report of child abuse or neglect that:**
 - 1. Has been accepted by the cabinet in accordance with 922 KAR 1:330; and**
 - 2. Names a director, employee, volunteer, or person with supervisory or disciplinary control over, or having unsupervised contact with a child in care as the alleged perpetrator.**

Findings:

General: Based on a review of documentation and interview, a child received a chipped front tooth and received medical treatment on 08/16/13 and 08/19/13. The cabinet did not receive notice of the injury until 08/20/13.

Director Requirements

270 - Parent Notification **Not In Compliance**

922 KAR 2:110. Section 4. Director Requirements and Responsibilities.

- (1) Effective with the adoption of this administrative regulation, a director shall:**
- (m) Notify the parent immediately of an accident or incident requiring medical treatment of a child;**

Findings:

General: Based on interviews, a child received a chipped tooth at 2:30 p.m. while at the center on 08/16/13. The parent was notified until she arrived to pick up the child at 5:30 p.m. on 08/16/13. The child was seen by a dentist on 08/16/13.

Signature of
Provider/Representative

Title

Date

