



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Name: Kare Bears	Provider Information	CLR No: L358318
Provider Address: 3155 Custer Drive, Suite A, Lexington, KY, 40517	Provider Type: LICENSED TYPE I	Capacity: 76
Owner(s): PEH, Inc.		Director(s): Oabel, Maricor Almadrones

Inspection Type: Investigation	Inspection Information	Inspection No: 322839
Date Initiated: 08/30/2022 8:47 AM	Date Concluded: 08/30/2022 9:15 AM	
	No. of Children Present: 31	

Inspection Report	
Supervision	In Compliance
Staffing Requirements	In Compliance

Signature of Provider/Representative

Title

Date