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**Inspection Report**

<b>Provider Name:</b> Lafayette Christian Church Child Care	<b>Provider Information</b> <b>Provider Type:</b> LICENSED TYPE I	<b>CLR No:</b> L350178
<b>Provider Address:</b> 1836 & 1824 Clays Mill Road, Lexington, KY, 40503		<b>Capacity:</b> 115
<b>Owner(s):</b> Lafayette Christian Church		<b>Director(s):</b> McKenzie, Angie Curtis

<b>Inspection Type:</b> Investigation	<b>Inspection Information</b>	<b>Inspection No:</b> 319361
<b>Date Initiated:</b> 10/27/2021 10:40 AM	<b>Date Concluded:</b> 10/27/2021 11:40 AM	
	<b>No. of Children Present:</b> 56	

Inspection Report	
Supervision	In Compliance
Staffing Requirements	In Compliance
General Administration	Not In Compliance

**225 - Licensee Responsibility** **Not In Compliance**

**922 KAR 2:090. Section 8. General.**  
**(1) A licensee shall:**  
**(a) Be responsible for the operation of the child-care center pursuant to this administrative regulation, 922 KAR 2:120, and 922 KAR 2:280; and**  
**(b) Protect and assure the health, safety, and comfort of each child.**

**Findings:**

General: Based on observation during the investigation in the infant room, two infants were found in cribs; one strapped in the bouncy seat that was set in the crib with blanket covering his face, and other on a play mat that was set in the crib. This poses a safety risk for the infants in care.

**Programming** **Not In Compliance**

**540 - Bedding/Toys in Crib** **Not In Compliance**

**922 KAR 2:120. Section 6. Sleeping and Napping Requirements.**  
**(3) Rest time shall occur in an adequate space according to the child's age as follows:**  
**(a) For an infant:**  
**3. No bedding other than a clean tight-fitted sheet; and**  
**4. No toys or other items except the infant's pacifier;**

**Findings:**

General: Based on observation, this regulatory requirement was not met. During the investigation, three infants were found in cribs along with multiple blankets, one in a bouncy seat set in the crib with a blanket over its head, and one on a play mat set in the crib.

Signature of Provider/Representative

Title

Date