Printed Date: 12/10/2020 KID013A v2.0



CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

Andy Beshear Governor

Melissa A. Moore, Director **Division of Regulated Child Care** Northern Branch 908 W. Broadway, 10-W Louisville, KY 40203 Phone: (502) 595-5781 Fax: (502) 595-5773 https://chfs.ky.gov/agencies/os/oig

Eric C. Friedlander Secretary

Adam Mather Inspector General

Inspection Report

Provider Information Provider Type: CERTIFIED

Provider Address: 3754 Penway Avenue, Louisville, KY, 40211

Provider Name: Jackson, Terri Lynn

No. of Children Enrolled: 11

CLR No: C71005 Capacity: 6

Inspection Information

Inspection Type: Annual Inspection Date Initiated: 06/18/2020 12:30 PM

Date Concluded: 06/22/2020 10:06 AM

No. of Children Present: 2

Inspection No: 293924

Inspection Report

Background Checks

Supervision

General Administration

Provider Requirements

Provider Records Programming

Premises

In Compliance **Not In Compliance**

In Compliance

In Compliance

In Compliance

In Compliance

In Compliance

Not In Compliance

922 KAR 2:100 - Section 13. Toilet and Diapering Requirements.

- (3) Each toilet shall:
- (a) Be kept in clean condition;
- (b) Be kept in good repair;
- (c) Be in a lighted room; and
- (d) Have ventilation.

Findings:

425 - Toilet

General: Based on observation, the toilet located in the bathroom was not secured to the floor at the time of the survey.

Hygienic Practices

First Aid/Medication

Outdoor Play Area

Equipment

Transportation

Food Service/Food Program

In Compliance

In Compliance

In Compliance

In Compliance

In Compliance

In Compliance

Inspection Report Food Service **Not In Compliance** 720 - Freezer At Zero Degrees Fahrenheit **Not In Compliance** 922 KAR 2:100 - Section 14. Food Requirements. (15) Except if thawed for preparation or use, frozen food shall be kept at a temperature of zero degrees Fahrenheit as verified by a thermometer in the freezer. Findings: General: Based on observation, the deep freezer located in the kitchen had an indicating thermometer reading of four (4) degrees Fahrenheit at the time of the survey. **Children's Records** In Compliance In Compliance **Written Documentation Posted/Available Documentation** In Compliance In Compliance **Posted Requirements** In Compliance

Signature of Provider/Representative

Title

Date