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GOVERNOR

**CABINET FOR HEALTH AND FAMILY SERVICES  
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**Inspection Report**

<b>Provider Name:</b> Gateway Early Head Start Morgan County	<b>Provider Information</b> <b>Provider Type:</b> LICENSED TYPE I	<b>CLR No:</b> L383743
<b>Provider Address:</b> 450 Prestonburg Street, West Liberty, KY, 41472		<b>Capacity:</b> 34
<b>Owner(s):</b> Gateway Community Service Organization, Inc.		<b>Director(s):</b> Roe, Martina Renae

<b>Inspection Type:</b> Initial Application	<b>Inspection Information</b>	<b>Inspection No:</b> 242033
<b>Date Initiated:</b> 09/28/2017 11:37 AM	<b>Date Concluded:</b> 09/28/2017 1:28 PM	
	<b>No. of Children Present:</b>	

Inspection Report		
<b>Supervision</b>		<b>In Compliance</b>
<b>Staffing Requirements</b>		<b>Discussed</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>Not Applicable</b>
<b>Equipment</b>		<b>In Compliance</b>
<b>Transportation</b>		<b>Not Applicable</b>
<b>Food Service</b>		<b>In Compliance</b>
<b>Children's Records</b>		<b>Discussed</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