Andy Beshear

**GOVERNOR** 



## CABINET FOR HEALTH AND FAMILY SERVICES **OFFICE OF INSPECTOR GENERAL**

## Melissa A. Moore, Director

**Division of Regulated Child Care** Western Branch 901 B South Main Street Hopkinsville, KY 42240 Phone: (270) 889-6052 Fax: (270) 889-6089 https://chfs.ky.gov/agencies/os/oig

## Inspection Report

**Provider Information** Provider Name: Barren County Family YMCA Child Provider Type: LICENSED TYPE I License No: 1356582 Care Provider Address: 1 Ymca Way, Glasgow, KY, 42141 Capacity: 140 Owner(s): BARREN COUNTY FAMILY YMCA, INC. Director(s): Roach, Melissa Annette **Inspection Information** Inspection Type: Investigation Inspection No: 106963 Visit Start Date: 08/08/2014 9:00 AM Visit End Date: 08/08/2014 11:30 AM **No. of Children Present:** Inspection Report **General Administration** 115 - Reports to Cabinet In Compliance

922 KAR 2:110. Section 6. 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:

1. Affects a child or staff person; or

2. Includes the center's discontinuation or disqualification from a governmental assistance program due to fraud or abuse;

(d) An incident involving fire or other emergency, including a vehicular accident when the center is transporting a child receiving child care services; 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.



Adam Mather **INSPECTOR GENERAL** 

**Eric Friedlander** 

SECRETARY

