



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

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Inspection Report

Provider Name: Buntin, Teffany	Provider Information	CLR No: C71063
Provider Address: 509 Gano Ave, Georgetown, KY, 40324	Provider Type: CERTIFIED	Capacity: 6

Inspection Type: Annual Inspection	Inspection Information	Inspection No: 292440
Date Initiated: 01/10/2020 9:41 AM	Date Concluded: 01/10/2020 11:12 AM	
No. of Children Enrolled: 14	No. of Children Present: 6	

Inspection Report		
Background Checks		In Compliance
Supervision		In Compliance
General Administration		Not In Compliance
110 - Written Plan of Correction		Not In Compliance
922 KAR 2:100 - Section 4. Statement of Deficiency and Corrective Action Plans. (2) Except for a violation posing an immediate threat, a family child-care home shall submit a written corrective action plan to the cabinet or its designee within ten (10) calendar days from receipt of the statement of deficiency to eliminate or correct the regulatory violation.		
Findings: A PLAN OF CORRECTION WAS DUE ON 02/06/2020 AND AS OF 02/10/2020, THE PLAN OF CORRECTION HAS NOT BEEN RECEIVED.		
Provider Requirements		In Compliance
Provider Records		In Compliance
Programming		In Compliance
Premises		In Compliance
Hygienic Practices		In Compliance
First Aid/Medication		In Compliance
Outdoor Play Area		In Compliance
Equipment		In Compliance
Transportation		In Compliance
Food Service/Food Program		In Compliance
Food Service		In Compliance

Inspection Report		
Children's Records		Not In Compliance
735 - Children's information		Not In Compliance
<p>922 KAR 2:100 - Section 18. Records.</p> <p>(1) A provider shall maintain:</p> <p>(b) A written record for each child:</p> <ol style="list-style-type: none"> 1. Completed and signed by the child's parent; 2. Retained on file on the first day the child attends the family child-care home; and 3. To contain: <ol style="list-style-type: none"> a. Identifying information about the child, which includes, at minimum, the child's name, address, and date of birth; b. Contact information to enable the provider to contact the child's: <ol style="list-style-type: none"> (i) Parent at the parent's home or place of employment; (ii) Family physician; and (iii) Preferred hospital; c. The name of each person who is designated in writing to pick-up the child; d. The child's general health status and medical history including, if applicable: <ol style="list-style-type: none"> (i) Allergies; (ii) Restriction on the child's participation in activities with specific instructions from the child's parent or health professional; and (iii) Permission from the parent for third-party professional services in the family child-care home; e. The name and phone number of each person to be contacted in an emergency situation involving or impacting the child; f. Authorization by the parent for the provider to seek emergency medical care for the child in the parent's absence; and <p>Findings:</p> <p>General: Based on review of documentation, two children enrolled 10/11/19 and 10/17/18, did not have a physician contact number listed in their enrollment information.</p>		
Written Documentation		In Compliance
Posted/Available Documentation		In Compliance
Animals		In Compliance
Posted Requirements		In Compliance

Signature of
Provider/Representative

Title

Date