



**Andy Beshear**  
GOVERNOR

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

**Eric Friedlander**  
SECRETARY

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**Adam Mather**  
INSPECTOR GENERAL

**Inspection Report**

<b>Provider Name:</b> Wayne, Charlotte Mae	<b>Provider Information</b> <b>Provider Type:</b> CERTIFIED	<b>CLR No:</b> C2351
<b>Provider Address:</b> 412 Happy Ridge Road, Brandenburg, KY, 40108		<b>Capacity:</b> 6

<b>Inspection Type:</b> Annual Inspection	<b>Inspection Information</b>	<b>Inspection No:</b> 242601
<b>Date Initiated:</b> 11/01/2017 8:00 AM	<b>Date Concluded:</b> 11/01/2017 9:30 AM	
<b>No. of Children Enrolled:</b> 8	<b>No. of Children Present:</b> 4	

<b>Inspection Report</b>		
<b>Supervision</b>		<b>In Compliance</b>
<b>General Administration</b>		<b>In Compliance</b>
<b>Provider Requirements</b>		<b>In Compliance</b>
<b>Provider 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>In Compliance</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>In Compliance</b>
<b>Written Documentation</b>		<b>In Compliance</b>
<b>Posted Documentation</b>		<b>In Compliance</b>
<b>Animals</b>		<b>Not Applicable</b>
<b>Posted Requirements</b>		<b>In Compliance</b>

Signature of Provider/Representative

Title

Date