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Andy BeshearGOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF INSPECTOR GENERAL

Melissa A. Moore, Director

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Eric Friedlander SECRETARY

Adam Mather
INSPECTOR GENERAL

Inspection Report

Provider Information

Provider Name: Lawson, Crystal Elaine **Provider Address:** 651 Ky 3436, Corbin, KY, 40701

No. of Children Enrolled: 5

Provider Type: CERTIFIED

CLR No: C52421 Capacity: 6

Inspection Information

Inspection Type: Annual Inspection

Date Initiated: 04/12/2021 11:40 AM

Date Concluded: 04/12/2021 12:15 PM

No. of Children Present: 4

Inspection No: 306703

| Inspection Report | |
|--------------------------------|---------------|
| Background Checks | In Compliance |
| Supervision | In Compliance |
| General Administration | In Compliance |
| Provider Requirements | In Compliance |
| Provider Records | In Compliance |
| Programming | In Compliance |
| Premises | In Compliance |
| Hygienic Practices | In Compliance |
| First Aid/Medication | In Complianc |
| Outdoor Play Area | In Complianc |
| Equipment | In Compliance |
| Transportation | In Complianc |
| Food Service/Food Program | In Compliance |
| Food Service | In Compliance |
| Children's Records | In Compliance |
| Written Documentation | In Complianc |
| Posted/Available Documentation | In Complianc |
| Animals | In Complianc |
| Posted Requirements | In Complianc |
| Emergency Regulation | In Complianc |