ATTENTION TO:

#  Rate the State Surveyors / State Inspectors

Complete & Send to the State Inspector’s Supervisor, Melissa Moore (Director), Dana Hayes (Assistant Director), and Adam Mather (Inspector General). Each Regional Branch Office and their information is located at the end of this form for your convenience.

Name of your Center: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Visit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name of the State Inspector / Inspectors

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1. Did they show you their badge and tell you the reason they were at your center for a visit? Annual, Investigation, Follow-Up, etc?

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1. Describe their Facial Expressions upon arrival?

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1. How was their demeanor during the visit? Were they Professional and Respectful? Were they Unprofessional and Disrespectful? How? In what ways?

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1. Were they Rude or Hateful?

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7. Did they make you or your staff do something against Regulation? If so, what?

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1. Did you feel like they were there to help you or discourage you with citation after citation? Did they go over the citations with you and try to give ideas on how you could make corrections?

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1. Did they do anything that you felt was inappropriate? Sexual Harassment, pointing their finger in your face, yelling at you or your staff, etc? Do you think these Inspectors could use more training?

How could they improve on an Inspection?

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1. On a scale of 1 - 10 -- 1 being the worst and 10 being the best -- How would you rate the Inspector / Inspectors? Why did you give them such a rating?

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**If you need additional room for your responses, please add them on a separate sheet of paper. Created by: Kentucky Association of Child Care Owners (KACCO)-www.kacco.org**

ATTENTION TO:

**Fax this Form to your Regional Office Supervisor:**

**Northern Branch:**

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Sara Dutschke

Fax Number: 502-595-5773

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**Western Branch:**

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## AND

Please fax to:

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**AND**

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## AND

Inspector General:

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