



CABINET FOR HEALTH AND FAMILY SERVICES
Department for Community Based Services
Division of Protection and Permanency

Date:

Facility name:

Facility Address:

Employee Name:

Intake ID:

On _____ the Cabinet for Health and Family Services (CHFS/ Cabinet) Department for Community Based Services (DCBS) received a report of suspected child abuse or neglect as defined in Kentucky Revised Statute (KRS) 600.020 regarding a child within the facility named above's care, listing an employee as an alleged perpetrator.

According to 922 KAR 1:300, a private child caring (PCC) agency employee subject to a Cabinet investigation shall be removed from direct contact with all children for the duration of the investigation or until documentation has been signed by the Division of Protection and Permanency (DPP) director or designee.

This letter is to confirm that _____, _____ an employee at _____, was listed as a perpetrator of abuse/neglect within a DCBS investigation. As of this date, the employee named above has been released to return to their regular duties. Furthermore, the above-listed agency and employee understand that should additional information be received before the completion of the DCBS investigation, the employee could be removed from their employment duties pending further assessment.

Approved

Denied

DPP Director (or designee)