

FACILITY VISIT

Facility Name: Kids Haven

Date: 12/23/2020

Time: 02:15

Provider: _____

Certificate #: 017097

Phone: 307-673-2831

Address: 326 Coffeen

City: Sheridan

Facility Type: ___ FCCH FCCC ___ CCC

Comments/TA Provided:

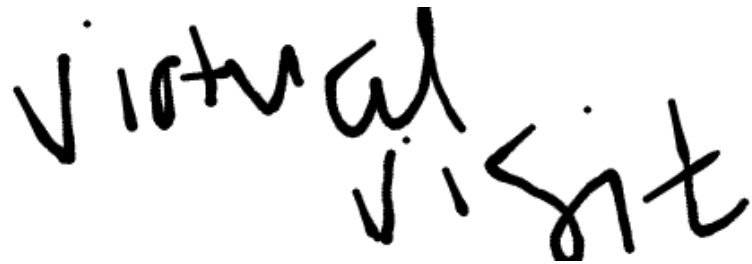
Virtual visit with Andrea. Facility was clean and organized at the time of the visit. She had various extra items out working on Christmas related projects. Andrea has 1 new staff and provided all required staff documents. Attendance records are kept and up to date. Andrea is also taking temps of kids upon arrival as a COVID precaution. At the time of the visit she had 1yr old, 3yr old, 4yr old, 7yr old, 7yr old with herself as staff. Infants sleep in pack and plays and licenser observed there was nothing in the pack and plays at the time of the visit. Andrea has not had any changes to her operation other than rearranging kids toys/activity layouts. Andrea has bleach spray mixed at appropriate levels. Andrea stated she met with technical assistance coach, Penny, and received great input and resources. She does not have any questions or needs at this time.

Director/Provider:



Date: 12/23/2020

Childcare Licenser:



Date: 12/23/2020