

FACILITY VISIT

Facility Name: Little Blessings

Date: 08/26/2020

Time: 09:04

Provider: _____

Certificate #: 000254

Phone: 307-431-0028

Address: 195 Pronghorn St. Ste. B

City: Casper

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Visit from renewal and required unannounced. Yvonne had her baby so she is out, Angela is her assistant when she is gone. 5-3 and up w/ Jessica. 3-2's w/Karla. 4- 1's Stacy. 3- infants Whitley. New infant sleeping in staff arms with a blanket. Discussed this is not used in crib. Four enrolled infants. Discussed tumble bus, children need to be signed out of care if the staff doesn't go with them. 5- kids on tumble bus 1 2yr. 4 3 yr olds. Groups moved around to meet ratio since Angela is leaving.

Director/Provider:



Date: 08/26/2020

Childcare Licensor:



Date: 08/26/2020