

FACILITY VISIT

Facility Name: Stephanie Fountain's Child Care

Date: 02/28/2024

Time: 12:05

Provider: \_\_\_\_\_

Certificate #: 017135

Phone: 307-267-1703

Address: 4725 W. Yellowstone Hwy.

City: Mills

Facility Type: \_\_\_ FCCH \_\_\_ FCCC X CCC

Comments/TA Provided:

Unannounced visit to monitor staff/child ratios. They moved the littles out to the front room with Stephanie. There were 9 children 3 1 yr olds, 1 yr old, 4 3 yr old, 1 5 yr old. She had the three 1 yr olds come out to her classroom to eat lunch. We discussed that they need to maintain the staff child ratios and needs to have staff come out into this area with her. We discussed and reviewed the relaxed nap ratio. Stephanie also had questions regarding an 18 month old drinking formula. Suggested that she have the parent get something from the pediatrician. Stephanie will get me a new staff record summary. I will email Stephanie the staff ratio charts. Please call me with any questions. Thank you!

Childcare  
Licensor:



Date: 02/28/2024

Director/Provider:



Date: 02/28/2024