

FACILITY VISIT

Facility Name: NEIGHBORHOOD CHILD CARING CENTER

Date: 03/07/2024

Time: 02:00

Provider: _____

Certificate #: 002305

Phone: 307-265-2333

Address: 2200 Richard Street

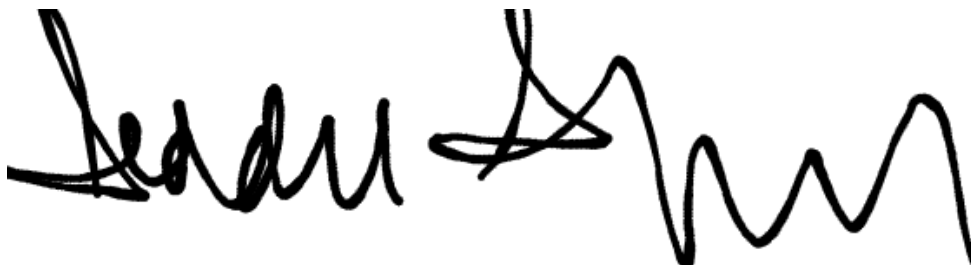
City: Casper

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Unannounced visit completed on this date. Reviewed staff records, all information is current and on file except for an out of state CR from CO. Gave Tiffany the information that the staff could not work until the time they have an approved variance or out of state CR. Showed Tiffany how to do access the Colorado screens. Tiffany will have the staff come in and complete the forms and submit a variance request. Discussed biting, discipline with food, and timeouts. I will send Tiffany the information for Penny Hotovec, TA coach so she can reach out for information to help with biting. Please contact me with any questions. Thank you!

Childcare
Licensor:



Date: 03/07/2024

Director/Provider:



Date: 03/07/2024