## FACILITY VISIT

Facility Name: Longhorn Tot Daycare, LLC	Date: <u>12/16/2021</u>	Time: <u>10:30</u>
Provider:	Certificate #: <u>016937</u>	Phone: <u>307-399-8643</u>
Address: <u>262 N. Morris</u>	City: <u>Rock River</u>	
Facility Type: FCCH X_FCCC CCC		

Comments/TA Provided:

Unannounced visit completed on this date. No hazard or violations observed. Review staff records - MT needs a variance for out of state CR, not working at this time. EC's central registry has expired, facility is going on Christmas break after today so submit this ASAP so results are returned prior to returned on 1/3/2021. Everything else is in compliance. Ratios 1:4 (I, 2, 3, 3). Discussed visiting therapists and sent visiting therapist variance template.

Childcare Licensor:

Date: <u>12/16/2021</u>

Dicrector/Providor:

Date: 12/16/2021