State of Wyoming Department of Family Services

FACILITY VISIT

Facility Name: **INDIAN HILLS**

Date: <u>06/29/2021</u>

Time: <u>09:11</u>

Provider:

Certificate #: <u>001835</u>

Phone: <u>307-742-4905</u>

Address: 4403 COMANCHE

City: Laramie

Facility Type: ___ FCCH X_FCCC ___ CCC

Comments/TA Provided:

Extra unannounced visit completed. Ratios 1:9 (5, 5, 4, 4, 3, 2, 2, 5, 2) - ratios in compliance. Reviewed staff records, gave reminder that central registry will expire for Barbara in September. Received new CPR/Fa for staff member BM, expires 02/2023. Home is clean and SO kid friendly. Kids in care are playing so nicely and independently - very neat to see.

Childcare Licensor:

Date: 06/29/2021

Dicrector/Providor:

Date: 06/29/2021