

<b>Center Name:</b> Anita Paige		<b>Address:</b> 426 Byrum Rd. Chaparral, NM 88021			<b>Phone:</b> (575)824-4535		
<b>License Number:</b> 62090	<b>Issue Date:</b> 03/26/2017	<b>Expiration Date:</b> 03/25/2018	<b>Type:</b> 2 Star Group Child Care Home		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	6	Under Age 2:	4	Night Care:	0	Playground:	0
		Over 2:	3	Under 2:	1		
<b>Days and Hours of Operation</b>							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed
Closing Times:	06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
<b># of Classrooms:</b> 1	<b>Purpose:</b> Semi-Annual		<b>Date:</b> 07/21/2017		<b>Time:</b> 11:45 AM		
<b>Comments</b> Health and Safety Training Completed 1st Aide/CPR Training Completed							

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure	
8.16.2.31 A LICENSING REQUIREMENTS	Not Inspected
8.16.2.31 B CAPACITY OF A HOME	Compliance
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.32 A ADMINISTRATIVE RECORDS	Not Inspected
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.32 C PARENT HANDBOOK	Not Inspected
8.16.2.32 D CHILDREN'S RECORDS	Not Inspected
8.16.2.32 E PERSONNEL RECORDS <u>Deficiencies</u> The home does not have documentation of a background check within 5 years for care giver(s).  Personnel Records indicates 2nd Caregiver submitted fingerprints but letter of clearance is not in file. Regulation: 8.16.2.32E(1)  <u>Corrective Action Plan</u> Documentation of a background check and employment history verification for all staff members and all adults living in the home. A background check must be conducted at least once every five years on all required individuals.  OBTAIN CLEARANCE LETTER FOR SECOND CAREGIVER  Date to be Completed: 08/21/2017	Non-compliance
8.16.2.32 F PERSONNEL HANDBOOK	Not Inspected

<b>Center Name:</b> Anita Paige	<b>License Number:</b> 62090	<b>Date:</b> 07/21/2017
<b>Personnel &amp; Staffing</b>		
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS		Compliance
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING		Compliance
<b>Services &amp; Care of Children</b>		
8.16.2.34 A GUIDANCE		Compliance
8.16.2.34 B NAPS OR REST PERIOD		Compliance
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		Compliance
8.16.2.34 D DIAPERING AND TOILETING		Compliance
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS		Not Inspected
8.16.2.34 F NIGHT CARE		N/A
8.16.2.34 G PHYSICAL ENVIRONMENT		Compliance
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT		Compliance
8.16.2.34 I EQUIPMENT AND PROGRAM		Compliance
8.16.2.34 J OUTDOOR PLAY		Compliance
8.16.2.34 K SWIMMING, WADING AND WATER		N/A
8.16.2.34 L FIELD TRIPS		N/A
<b>Food Service</b>		
8.16.2.35 B MEALS AND SNACKS		Compliance
8.16.2.35 C MENUS		Compliance
8.16.2.35 D KITCHENS		Compliance
8.16.2.35 E MEAL TIMES		Compliance
<b>Health &amp; Safety Requirements</b>		
8.16.2.36 A HYGIENE		Compliance
8.16.2.36 B FIRST AID REQUIREMENTS		Not Inspected
8.16.2.36 C MEDICATION		Not Inspected
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES		Not Inspected
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES		N/A
<b>Buildings, Grounds &amp; Safety</b>		
8.16.2.38 A HOUSEKEEPING		Compliance
8.16.2.38 B PEST CONTROL		Not Inspected
8.16.2.38 C MECHANICAL SYSTEMS		Compliance
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL		Compliance
8.16.2.38 E EXITS		Compliance
8.16.2.38 F TOILET AND BATHING FACILITIES		Compliance
8.16.2.38 G SAFETY COMPLIANCE		Compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Not Inspected

Center Name:

Anita Paige

License Number:

62090

Date:

07/21/2017

**Buildings, Grounds & Safety**

8.16.2.38 | PETS

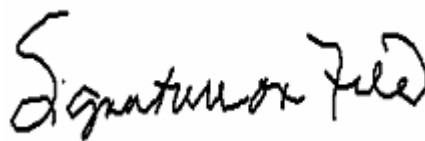
Compliance

Please note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans as noted above, may result in further action taken against the licensee.



Sandra Connolly  
1d15p

07/21/2017



Signature on file

07/21/2017

Surveyor: Sandra Connolly

Date

Facility Rep: Anita Paige

Date