

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

			SURV	VEY REPOR	RT						
Center Name:			Address: 1318 14tth					Phon	e:		
CHINS Community Pre	e-K		Alamogoro	do, NM 88310							
License Number:	Issue Date:	Expiration I	Date:	Туре:			Status:				
162886	09/2/2016	09/1/2017		3 Star FOC	CUS Child Care Center		Licensed				
Capacity							nsus				
Over Age 2: 20	Under Age 2:	0 Night	Care:	0 P	layground: 20	Ov	er 2:	0	Under 2:	0	
Days and Hours of	Operation										
Opening Times	<u>Monday</u> : 08:00 AM	<u>Tuesda</u> 08:00 Al	-	Vednesday 08:00 AM	<u>Thursday</u> 08:00 AM		<u>iday</u> 00 AM	<u>Saturda</u> Closed	-	<u>Sunday</u> Closed	
Opening Times Closing Times		02:30 PI		02:30 PM	02:30 PM		30 PM	Closed		Ciosed	
# of Classrooms:		urpose:			Date:			Time:			
1	F	ollow-up			03/13/2017			11:16 AM			
Comments							100/00	A	- 4 -		
Facility Director sub "N/A" are not applic		-	ne deficien	cy noted on	Semi-Annual survey	dated 1	/20/2017.	Areas mark	ed as		
A SUR	VEY OF YOUR FACILI	ITY HAS BEEN MA	DE AND YOU	U ARE NOTIFIE	D OF NON-COMPLIANC	E OF TH	E REGULAT	IONS AS NOTE	D BELOW:		
				Lice	nsure						
8.16.2.11 A TYPES	OF LICENSES										N/A
8.16.2.11 B RENEW	AL OF LICENSE										N/A
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE								N/A			
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS								N/A			
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES								N/A			
8.16.2.18 D COMPLAINTS								N/A			
8.16.2.21 A LICENSING REQUIREMENTS								N/A			
8.16.2.21 B CAPACITY OF CENTERS								N/A			
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS								N/A			
			Adm	inistrative	Requirements						
8.16.2.22 A ADMIN	STRATION RECO	RDS									N/A
8.16.2.22 B MISSIO			UM STATE	EMENT							N/A
8.16.2.22 C POLICY AND PROCEDURES								N/A			
8.16.2.22 D FAMILY HANDBOOK								N/A			
8.16.2.22 E CHILDR										Comel	N/A
8.16.2.22 F PERSONNEL RECORDS 8.16.2.22 G PERSONNEL HANDBOOK							Compli				
0. 10.2.22 G PERSU		n		Dawa	9 Ctoffing						N/A
8 16 2 23 A DEPOO				Personnel	& Staffing						N/A
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS 8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING						N/A					
0.10.2.20 D 31AFF			-								

Center Name:	License Number:	Date:	
CHINS Community Pre-K	162886	03/13/2017	
Personnel & S	Staffing	1	
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES			N/A
Services & Care	of Children	ł.	
8.16.2.24 A GUIDANCE			N/A
8.16.2.24 B NAPS OR REST PERIOD			N/A
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		N/A	
8.16.2.24 D DIAPERING AND TOILETING		N/A	
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NE		N/A	
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE		N/A	
8.16.2.24 G PHYSICAL ENVIRONMENT		N/A	
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT		N/A	
8.16.2.24 I EQUIPMENT AND PROGRAM			N/A
8.16.2.24 J OUTDOOR PLAY AREAS			N/A
8.16.2.24 K SWIMMING, WADING AND WATER		N/A	
8.16.2.24 L FIELD TRIPS			N/A
Food Serv	vice		
8.16.2.25 B MEALS AND SNACKS			N/A
8.16.2.25 C MENUS			N/A
8.16.2.25 D KITCHENS		N/A	
8.16.2.25 E MEAL TIMES			N/A
Health & Safety Re	equirements		
8.16.2.26 A HYGIENE			N/A
8.16.2.26 B FIRST AID REQUIREMENTS			N/A
8.16.2.26 C MEDICATION			N/A
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		N/A	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS		N/A	
Buildings, Ground	ds & Safety		
8.16.2.29 A HOUSEKEEPING	•		N/A
8.16.2.29 B PEST CONTROL			N/A
8.16.2.29 C MECHANICAL SYSTEMS			N/A
8.16.2.29 D WATER AND WASTE			N/A
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL		N/A	
8.16.2.29 F EXITS AND WINDOWS		N/A	
8.16.2.29 G TOILET AND BATHING FACILITIES		N/A	
8.16.2.29 H SAFETY COMPLIANCE		N/A	
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CHINS Community Pre-K	162886	03/13/2017						
Buildings, Grounds & Safety								
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	N/A							
8.16.2.29 J PETS			N/A					

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.

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ature on file

03/13/2017

Surveyor:Sandra Connolly

03/13/2017 Date

Facility Rep:Sara Wilson

Survey Report Form