

Center Name:			Address:					Phone:		
Carla Smith	Carla Smith			1302 lowa Ave Alamogordo, NM 88310					(575)415-8227	
License Number:	Issue Date:	Expiration [Date:	Type:			Status:	Ī		
73819	06/1/2017	03/28/2018	2 Star Family Child Care Home Licensed			Licensed				
Capacity				•		Cei	nsus			
Over Age 2: 3	Under Age 2:	2 Night	Care:	0 P	ayground: 0	Ove	er 2:	1	Under	2: 0
Days and Hours of	Operation					-				
	<u>Monday</u>	Tuesda	<u>w</u>	<u>/ednesday</u>	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	S	<u>aturday</u>	<u>Sunday</u>
Opening Times:	06:00 AM	06:00 AM	Л	06:00 AM 06:00 AM 06		06:0	06:00 AM		Closed	Closed
Closing Times	01:00 AM	01:00 AM	Л	01:00 AM	01:00 AM	01:0	0 AM			
# of Classrooms:	P	urpose:			Date:			Time	e:	
1	Α	nnual			01/09/2018			12:20	0 PM	
Comments										

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	Compliance	
8.16.2.31 B CAPACITY OF A HOME	Compliance	
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Compliance	
Administrative Requirements		
8.16.2.32 A ADMINISTRATIVE RECORDS	Compliance	
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance	
8.16.2.32 C PARENT HANDBOOK	Not Inspected	
8.16.2.32 D CHILDREN'S RECORDS Deficiencies Of the 8 children's records reviewed, 3 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.32 form for the child(ren) with no immunization/exemption. Regulation: 8.16.2.32D(1)(e) Corrective Action Plan The home will review a child's record to ensure complete information has been obtained before a child is admitted. Date to be Completed: 02/09/2018	Non-compliance	

Survey Report Form Page 1 of 5

Center Name:	License Number:	Date:	
Carla Smith	73819	01/09/2018	

Administrative Requirements

Deficiencies

There was no record of each child's arrival and departure time and dates of attendance initialed by a parent, guardian, or person authorized to pick up the child. Of 1 child present 0 were signed in. See Children's Records 8.16.2.32 form for the child(ren) with missing information.

Regulation: 8.16.2.32D(1)(i)

Corrective Action Plan

The home will maintain a record of the time any child arrived and left the home and dates of attendance initialed by a parent, guardian, or person authorized to pick up the child.

Date to be Completed: 02/09/2018	
8.16.2.32 E PERSONNEL RECORDS	Compliance
8.16.2.32 F PERSONNEL HANDBOOK	N/A
Personnel & Staffing	
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	Non-compliance
Deficiencies From the review of staff records, it was determined that one out of one staff working more than 20 hours a week, has/have no documentation of at least 12 hours of annual training in the approved subject areas See Staff Records 8.16.2.32 for staff missing documentation of training. Regulation: 8.16.2.33B(3) Corrective Action Plan Annual training will be completed as required and documentation retained on file. Date to be Completed: 02/09/2018 Deficiencies	
The home does not have on duty at all times all educators certified in first aid and cardiopulmonary resuscitation (CPR). Regulation: 8.16.2.33B(6)	
Corrective Action Plan A home must have all educators certified in first aid and cardio-pulmonary resuscitation (CPR). Date to be Completed: 02/09/2018	
Services & Care of Children	
8.16.2.34 A GUIDANCE	Compliance

8.16.2.34 A GUIDANCE	Compliance
8.16.2.34 B NAPS OR REST PERIOD	Not Inspected
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	N/A
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	Not Inspected
8.16.2.34 G PHYSICAL ENVIRONMENT	Non-compliance

Survey Report Form Page 2 of 5

Center Name:	License Number:	Date:
Carla Smith	73819	01/09/2018

Services & Care of Children

Deficiencies

Functional learning centers/areas are not organized into the following identifiable areas: a place for loud, active play; a place for playing quietly; a place to read

Regulation: 8.16.2.34G(1

Corrective Action Plan

The environment will be rearranged to provide functional identifiable learning centers/areas.

Date to be Completed: 02/09/2018

8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Compliance
8.16.2.34 I EQUIPMENT AND PROGRAM	Non-compliance
<u>Deficiencies</u>	
The home does not provide children in the Combination Classroom(s) sufficient equipment;	
materials; furnishings for indoor activities so that at any one time each child can be	
individually involved.	
Regulation: 8.16.2.34l(3)	
Corrective Action Plan	
Additional equipment; materials; furnishings will be obtained.	
Date to be Completed: 02/09/2018	
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
Food Service	
8.16.2.35 B MEALS AND SNACKS	Not Inspected
8.16.2.35 C MENUS	Non-compliance
<u>Deficiencies</u>	
Weekly menus are not dated and posted in an area easily visible to parents.	
Regulation: 8.16.2.35C(1)	
Corrective Action Plan	
A dated weekly menu will be posted in an area visible to parents. Menus shall be posted at	
least one week in advance, in a conspicuous place, for review by parents, educators and	
children.	
Date to be Completed: 02/09/2018	
8.16.2.35 D KITCHENS	Non-compliance
<u>Deficiencies</u>	
The home's refrigerator; freezer does not have a working internal thermometer.	
Regulation : 8.16.2.35D(7)	
Corrective Action Plan	
A working internal thermometer will be obtained.	
Date to be Completed: 02/09/2018	

Survey Report Form Page 3 of 5

Center Name:	License Number:	Date:
Carla Smith	73819	01/09/2018

Food Service

Deficiencies

A leftover is not properly stored; the item is not in an airtight container; labeled and dated.

Regulation: 8.16.2.35D(4)

Corrective Action Plan

Proper food storage practices will be implemented.

Date to be Completed: 02/09/2018

Date to be Completed: 02/09/2018	
8.16.2.35 E MEAL TIMES	Not Inspected
Health & Safety Requirements	
8.16.2.36 A HYGIENE	Compliance
8.16.2.36 B FIRST AID REQUIREMENTS	Non-compliance
<u>Deficiencies</u>	
The home's first aid kit does not contain gauze pads; adhesive tape; scissors; nonporous	
gloves; a thermometer.	
Regulation: 8.16.2.36B(1)	
Corrective Action Plan	
Missing items will be added to the first-aid kit and replaced as used.	
Date to be Completed: 02/09/2018	
8.16.2.36 C MEDICATION	Non-compliance
<u>Deficiencies</u>	
Medication that does not require refrigeration is not stored in a locked and identified	
container. The following items were accessible to the children: ibuprofren.	
Regulation: 8.16.2.36C(1)	
Corrective Action Plan	
Staff responsible for receiving medication will place it in a locked and identified container.	
Date to be Completed: 02/09/2018	
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES	Compliance
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES	N/A
Buildings, Grounds & Safety	
8.16.2.38 A HOUSEKEEPING	Compliance
8.16.2.38 B PEST CONTROL	N/A
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	Non-compliance

Survey Report Form Page 4 of 5

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 73819
 01/09/2018

Buildings, Grounds & Safety

Deficiencies

The home failed to conduct an emergency preparedness practice drills for at least once a quarter.

Regulation: 8.16.2.38 G(3)

Corrective Action Plan

A home will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year.

Date to be Completed: 02/09/2018

Deficiencies

An operable smoke detector is missing in each child activity room.

Regulation: 8.16.2.38G(1)

Corrective Action Plan

An operable smoke detector will be in each activity and sleeping room.

Date to be Completed: 02/09/2018

Deficiencies

The home's fire extinguisher does not have a tag with a date verifying yearly inspection.

Regulation: 8.16.2.38G(2)

Corrective Action Plan

The fire extinguisher will be inspected and have an official tag noting the date of inspection .

Date to be Completed: 02/09/2018

8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.38 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.

01/09/2018

01/09/2018

Surveyor:Emma Gonzales

Emma Bonjalis 130

Date

Facility Rep:Carla Smith

Page 5 of 5

Date