



**Facility**

Name: *Charlene Joseph* License Number: *77693*  
 Address: *811 Arapaho, Alamogordo, NM 88310*  
 Phone: *575-446-8436* Fax: *n/a* E-mail: *charlenejoseph358@gmail.com*

**License Information**

Type: *2 Star Family Child Care Home* Status: *Licensed* Issue Date: *04/16/2018* Expiration Date: *04/15/2019*

**Capacity**

Over Age 2: *4* Under Age 2: *2* Night Care: *0* Playground: *0*  
 Square Footage: *0*

**Census**

Over 2: *2* Under 2: *0*

**Classrooms**

Number of Classrooms: *1*

**Days and Hours of Operation**

<b>Monday</b> <i>6:30 AM - 11:00 PM</i>	<b>Tuesday</b> <i>6:30 AM - 11:00 PM</i>	<b>Wednesday</b> <i>6:30 AM - 11:00 PM</i>	<b>Thursday</b> <i>6:30 AM - 11:00 PM</i>	<b>Friday</b> <i>6:30 AM - 11:00 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

**Inspection**

Date: *08/16/2018* Time In: *11:00 AM* Time Out: *11:53 AM* Purpose: *Semi-Annual*

**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 *Not Inspected*

**Administrative Requirements**

- 8.16.2.32 A Administrative Records *Compliance*
- 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*

### Administrative Requirements *(continued)*

8.16.2.32 E Personnel Records	<i>Not Inspected</i>
8.16.2.32 F Personnel Handbook	<i>Not Inspected</i>

### Personnel & Staffing

8.16.2.33 A Personnel and Staffing Requirements	<i>Compliance</i>
8.16.2.33 B Staff Qualifications and Training	<i>Compliance</i>

### Services & Care of Children

8.16.2.34 A Guidance	<i>Compliance</i>
8.16.2.34 B Naps or Rest Period	<i>Not Inspected</i>
8.16.2.34 C Additional Requirements for Infants and Toddlers	<i>Compliance</i>
8.16.2.34 D Diapering and Toileting	<i>Not Inspected</i>
8.16.2.34 E Additional Requirements for Children with Special Needs	<i>Not Inspected</i>
8.16.2.34 F Night Care	<i>Not Inspected</i>
8.16.2.34 G Physical Environment	<i>Compliance</i>
8.16.2.34 H Social-Emotional Responsive Environment	<i>Compliance</i>
8.16.2.34 I Equipment and Program	<i>Compliance</i>
8.16.2.34 J Outdoor Play	<i>Compliance</i>
8.16.2.34 K Swimming, Wadding and Water	<i>N/A</i>
8.16.2.34 L Field Trips	<i>N/A</i>

### Food Service

8.16.2.35 B Meals and Snacks	<i>Compliance</i>
8.16.2.35 C Menus	<i>Compliance</i>
8.16.2.35 D Kitchens	<i>Compliance</i>
8.16.2.35 E Meal Times	<i>Not Inspected</i>

### Health & Safety Requirements

8.16.2.36 A Hygiene	<i>Compliance</i>
8.16.2.36 B First Aid Requirements	<i>Not Inspected</i>
8.16.2.36 C Medication	<i>Compliance</i>
8.16.2.36 D Illness and Notifiable Diseases	<i>Not Inspected</i>

## Health & Safety Requirements (*continued*)

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 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 N/A

8.16.2.38 I Pets N/A

## Additional Comments

*Did not observe Nap/Rest Period*

## Signatures

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



Surveyor: Sandra Connolly



Facility Representative: Charlene Joseph