



Facility

Name: *Charles Brown* License Number: *149402*
 Address: *1813 Debra, Clovis, NM 88101*
 Phone: *5757491990* Fax: E-mail: *CNBPKC@gmail.com*

License Information

Type: *5 Star FOCUS Group Child Care Home* Status: *Licensed* Issue Date: *05/22/2018* Expiration Date: *05/21/2019*

Capacity

Over Age 2: *8* Under Age 2: *4* Night Care: *0* Playground: *0*
 Square Footage: *420*

Census

Over 2: *-* Under 2: *-*

Classrooms

Number of Classrooms: *2*

Days and Hours of Operation

Monday <i>7:00 AM - 7:00 PM</i>	Tuesday <i>7:00 AM - 7:00 PM</i>	Wednesday <i>7:00 AM - 7:00 PM</i>	Thursday <i>7:00 AM - 7:00 PM</i>	Friday <i>7:00 AM - 7:00 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *05/29/2018* Time In: *2:51 AM* Time Out: *3:01 PM* Purpose: *Follow-up*

Licensure

8.16.2.31 A Licensing Requirements *Not Inspected*
 8.16.2.31 B Capacity of a Home *Not Inspected*
 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*

Administrative Requirements (*continued*)

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

Personnel & Staffing

8.16.2.33 A Personnel and Staffing Requirements	<i>Not Inspected</i>
8.16.2.33 B Staff Qualifications and Training	<i>Not Inspected</i>

Services & Care of Children

8.16.2.34 A Guidance	<i>Not Inspected</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>Not Inspected</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>Not Inspected</i>
8.16.2.34 H Social-Emotional Responsive Environment	<i>Not Inspected</i>
8.16.2.34 I Equipment and Program	<i>Not Inspected</i>
8.16.2.34 J Outdoor Play	<i>Not Inspected</i>
8.16.2.34 K Swimming, Wadding and Water	<i>Not Inspected</i>
8.16.2.34 L Field Trips	<i>Not Inspected</i>

Food Service

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

Health & Safety Requirements

8.16.2.36 A Hygiene	<i>Not Inspected</i>
8.16.2.36 B First Aid Requirements	<i>Not Inspected</i>
8.16.2.36 C Medication	<i>Not Inspected</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 *Not Inspected*

Buildings, Grounds & Safety

8.16.2.38 A Housekeeping *Not Inspected*

8.16.2.38 B Pest Control *Not Inspected*

8.16.2.38 C Mechanical Systems *Not Inspected*

8.16.2.38 D Lighting, Lighting Fixtures and Electrical *Not Inspected*

8.16.2.38 E Exits *Not Inspected*

8.16.2.38 F Toilet and Bathing Facilities: *Not Inspected*

8.16.2.38 G Safety Compliance *Not Inspected*

8.16.2.38 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances *Not Inspected*

8.16.2.38 I Pets *Not Inspected*

Additional Comments

Follow up for survey dated 04/12/2018 completed by e-mail.

All Deficiencies have been cleared.

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.

Maria Due Aragon 3:01

Surveyor: *Maria Aragon*

Signature on file

Facility Representative: *Charles Brown*