

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

| Center Name: | | | Address: | | | | Phone | : | |
|---|--|--------------------|----------------------|-------------------|---------------|----------------|-----------------|----------|-------------|
| Cradles and Crayons - Chaparral 431 Mc Combs Chaparral, NM 88021 | | | 21 | | | (575)82 | 4-5390 | | |
| License Number: | Issue Date: | Expiration | 4 · · · | | | Status: | | | |
| 144964 | 06/1/2017 | 08/27/2017 | 3 Star | FOCUS Child Care | Center | Licensed | | | |
| Capacity | | | | | Ce | ensus | | | |
| Over Age 2: 44 | Under Age 2: | 10 Night | t Care: 0 | Playground: | 33 Ov | er 2: | 21 | Under 2: | 3 |
| Days and Hours of | Operation | | | | • | | | | |
| | Monday | | | - | | <u>iday</u> | <u>Saturday</u> | | Sunday |
| Opening Times Closing Times | | | | | | 00 AM 30 PM | Closed | | Closed |
| # of Classrooms: | | Purpose: | | Date: | | | Time: | | |
| 4 | | Other | | 06/29/2017 | | | 02:59 PM | | |
| Comments | | | | | | | | | |
| Upon entering the fa | acility the followi | ng items were fou | ind; please see belo | W | | | | | |
| A SUR | VEY OF YOUR FAC | CILITY HAS BEEN MA | ADE AND YOU ARE NO | TIFIED OF NON-CON | PLIANCE OF TH | E REGULATIO | NS AS NOTED | BELOW: | |
| | | | Li | censure | | | | | |
| 8.16.2.11 A TYPES | OF LICENSES | | | | | | | | Compliance |
| 8.16.2.11 B RENEV | VAL OF LICENS | E | | | | | | | 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 | | | | | | Compliance | | | |
| 8.16.2.21 A LICENSING REQUIREMENTS | | | | | | | N/A | | |
| 8.16.2.21 B CAPAC | ITY OF CENTE | RS | | | | | | | N/A |
| 8.16.2.21 C INCIDENT REPORTING REQUIREMENTS | | | | | | | N/A | | |
| | | | Administrat | tive Requirem | ents | | | | |
| 8.16.2.22 A ADMIN | ISTRATION REC | CORDS | | | | | | | N/A |
| 8.16.2.22 B MISSIC | 8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT | | | | | | 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 CHILDREN'S RECORDS | | | | | | N/A | | | |
| 8.16.2.22 F PERSONNEL RECORDS | | | | | | N/A | | | |
| 8.16.2.22 G PERSONNEL HANDBOOK | | | | | | N/A | | | |
| Personnel & Staffing | | | | | | | | | |
| 8.16.2.23 A PERSO | | | | | | on-compliance | | | |
| | 00 | | | | | | | | |
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| Contor Nama | Lissnes Number | Data |] | |
|---|---------------------------|---------------------|----------------|--|
| Center Name: Cradles and Crayons - Chaparral | License Number: 144964 | Date: 06/29/2017 | | |
| | | 00/20/2011 | | |
| Personnel & S | taffing | | | |
| Deficiencies The child(ren) in the School Age class room(s) was/were left unattended alone in the hallway next to the infant room and educator from the afters know he had left the classroom area. Regulation: 8.16.2.23A(9) Corrective Action Plan | | | | |
| Corrective Action Plan Requirements for supervision of children whether inside or outside the facility will be reviewed with staff. CORRECTED ON SITE. Date to be Completed: 07/29/2017 | | | | |
| Deficiencies In the Infant - (6 wk 12 mo.) class room(s) the staffing/child ratio was e there was one educator to seven children. Regulation: 8.16.2.23A(9) | exceeded when | | | |
| Corrective Action Plan A program will maintain staff/child ratios and group sizes at all times. Chi be left unattended whether inside or outside the facility. Staff will be onsi responsive to children during all hours of operation. CORRECTED ON S Date to be Completed: 07/29/2017 | ite, available and | | | |
| 8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING | | | N/A | |
| 8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES | | | N/A | |
| Services & Care o | of Children | · | | |
| 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 <u>Deficiencies</u> The center does not provide appropriate grouping for infants and toddler children six weeks to twelve months are in the same room with children without any physical separation between the two age groups. Regulation: 8.16.2.24C(7) | • | | Non-compliance | |
| Corrective Action Plan Groupings will be made as required; children under two years will have a separate from older children; a physical separation will be installed betwo children six weeks to twelve months and space for children 13 to 24 mor Date to be Completed: 07/29/2017 | een space for | | | |
| 8.16.2.24 D DIAPERING AND TOILETING | | | N/A | |
| 8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEE | | 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 | |
| | | | Page 2 of 3 | |

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|---|--------------------|------------|-----|
| Cradles and Crayons - Chaparral | 144964 | 06/29/2017 | |
| Services | & Care of Children | | |
| 8.16.2.24 K SWIMMING, WADING AND WATER | | | N/A |
| 8.16.2.24 L FIELD TRIPS | | | N/A |
| Fo | ood Service | | |
| 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 & S | afety Requirements | | |
| 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 | , Grounds & 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 |
| 8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES | | | 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. | | | | | |
|---|------------|-----------------------------|------------|--|--|
| Cuptal Black 3:35 | 06/29/2017 | HACH! | 06/29/2017 | | |
| Surveyor:Crystal Estrada | Date | Facility Rep:Maria Granados | Date | | |