



Facility

Name: *Deborah Hernandez* License Number: *102037*
 Address: *1805 Mountain View, Alamogordo, NM 88310*
 Phone: *5754430284* Fax: E-mail: *mysapito@hotmail.com*

License Information

Type: *2 Star Family Child Care Home* Status: *Licensed* Issue Date: *11/22/2017* Expiration Date: *11/21/2018*

Capacity

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

Census

Over 2: *5* Under 2: *1*

Classrooms

Number of Classrooms: *1*

Days and Hours of Operation

Monday <i>7:00 AM - 5:30 PM</i>	Tuesday <i>7:00 AM - 5:30 PM</i>	Wednesday <i>7:00 AM - 5:30 PM</i>	Thursday <i>7:00 AM - 5:30 PM</i>	Friday <i>7:00 AM - 5:30 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *09/11/2018* Time In: *12:45 PM* Time Out: *1:40 PM* Purpose: *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 *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 *Compliance*
- 8.16.2.32 D Children's Records *Compliance*

Administrative Requirements (*continued*)

8.16.2.32 E Personnel Records	<i>Compliance</i>
8.16.2.32 F Personnel Handbook	<i>Compliance</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>Compliance</i>
8.16.2.34 C Additional Requirements for Infants and Toddlers	<i>Compliance</i>
8.16.2.34 D Diapering and Toileting	<i>Compliance</i>
8.16.2.34 E Additional Requirements for Children with Special Needs	<i>N/A</i>
8.16.2.34 F Night Care	<i>N/A</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>Compliance</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>Compliance</i>

Health & Safety Requirements

8.16.2.36 A Hygiene	<i>Compliance</i>
8.16.2.36 B First Aid Requirements	<i>Compliance</i>
8.16.2.36 C Medication	<i>N/A</i>
8.16.2.36 D Illness and Notifiable Diseases	<i>Compliance</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

Compliance

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

Compliance

8.16.2.38 I Pets

Non-compliance

The home does not have a record of inoculations for a pet dog, cat in the home.

Corrective Action Plan

An inoculation record will be obtained and kept on file for future review.

Regulation: 8.16.2.38.I.2.

Date to be Completed: 10/11/2018

Additional Comments

Annual Inspection

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: Jose Morales



Facility Representative: Deborah Hernandez