

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name: Address: Phone:				
Desert Montessori School     316 Camino Delora     (505)983       Santa Fe, NM 87505     (505)983	3-8212			
License Number: Issue Date: Expiration Date: Type: Status:				
69495         02/5/2017         02/4/2018         2 Star Child Care Center         Licensed				
Capacity Census				
Over Age 2:     90     Under Age 2:     0     Night Care:     0     Playground:     68     Over 2:     19     L	Jnder 2: 0			
Days and Hours of Operation				
Monday Tuesday Wednesday Thursday Friday Saturday	Sunday			
Opening Times:         07:30 AM         07:30 AM         07:30 AM         07:30 AM         07:30 AM         Closed           Closing Times:         05:30 PM         05:30 PM         05:30 PM         05:30 PM         05:30 PM         05:30 PM	Closed			
# of Classrooms: Purpose: Date: Time:				
3 Follow-up 02/07/2017 10:12 AM				
Comments				
Annual was conducted by M. Romero and D. Ortega. Follow up was forwarded to A. Martinez by D. Ortega				
A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED	BELOW:			
Licensure				
8.16.2.11 A TYPES OF LICENSES	Compliance			
8.16.2.11 B RENEWAL OF LICENSE	Compliance			
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	Compliance			
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	Compliance			
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Compliance			
8.16.2.18 D COMPLAINTS	Compliance			
8.16.2.21 A LICENSING REQUIREMENTS	Compliance			
8.16.2.21 B CAPACITY OF CENTERS	Compliance			
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Compliance			
Administrative Requirements				
8.16.2.22 A ADMINISTRATION RECORDS	Compliance			
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance			
8.16.2.22 C POLICY AND PROCEDURES	Compliance			
8.16.2.22 D FAMILY HANDBOOK	Compliance			
8.16.2.22 E CHILDREN'S RECORDS	Compliance			
8.16.2.22 F PERSONNEL RECORDS	Compliance			
8.16.2.22 G PERSONNEL HANDBOOK	Compliance			
Personnel & Staffing				
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance			
	Compliance			
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING				

Center Name: Li Desert Montessori School	icense Number: 69495	Date: 02/07/2017		
Services & Care of C				
8.16.2.24 A GUIDANCE			Compliance	
8.16.2.24 B NAPS OR REST PERIOD			Compliance	
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS			Compliance	
8.16.2.24 D DIAPERING AND TOILETING			Compliance	
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS			Compliance	
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE			Compliance	
8.16.2.24 G PHYSICAL ENVIRONMENT			Compliance	
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT			Compliance	
8.16.2.24 I EQUIPMENT AND PROGRAM			Compliance	
8.16.2.24 J OUTDOOR PLAY AREAS			Compliance	
8.16.2.24 K SWIMMING, WADING AND WATER			N/A	
8.16.2.24 L FIELD TRIPS			N/A	
Food Service				
8.16.2.25 B MEALS AND SNACKS			Compliance	
8.16.2.25 C MENUS			Compliance	
8.16.2.25 D KITCHENS			Compliance	
8.16.2.25 E MEAL TIMES			Compliance	
Health & Safety Requi	irements			
8.16.2.26 A HYGIENE			Compliance	
8.16.2.26 B FIRST AID REQUIREMENTS			Compliance	
8.16.2.26 C MEDICATION			Compliance	
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS			Compliance	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS			N/A	
Buildings, Grounds & Safety				
8.16.2.29 A HOUSEKEEPING			Compliance	
8.16.2.29 B PEST CONTROL			Compliance	
8.16.2.29 C MECHANICAL SYSTEMS			Compliance	
8.16.2.29 D WATER AND WASTE			Compliance	
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL			Compliance	
8.16.2.29 F EXITS AND WINDOWS			Compliance	
8.16.2.29 G TOILET AND BATHING FACILITIES			Compliance	
8.16.2.29 H SAFETY COMPLIANCE			Compliance	
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		TANCES	Compliance	
8.16.2.29 J PETS			N/A	

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Desert Montessori School	69495	02/07/2017

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.

Signative on file

Facility Rep:Autumn Wise

02/07/2017

Date

02/07/2017

Surveyor: Aurora Martinez

Survey Report Form

Date