



Facility

Name: *Dian Newman* **License Number:** *130826*
Address: *2307 E. 2nd St, Roswell, NM 88201*
Phone: *5759100980* **Fax:** **E-mail:**

License Information

Type: *2 Star Group Child Care Home* **Status:** *Licensed* **Issue Date:** *03/27/2018* **Expiration Date:** *03/26/2019*

Capacity

Over Age 2: *8* **Under Age 2:** *4* **Night Care:** *0* **Playground:** *0*
Square Footage: *240*

Census

Over 2: *4* **Under 2:** *3*

Classrooms

Number of Classrooms: *2*

Days and Hours of Operation

Monday <i>12:00 AM - 11:59 PM</i>	Tuesday <i>12:00 AM - 11:59 PM</i>	Wednesday <i>12:00 AM - 11:59 PM</i>	Thursday <i>12:00 AM - 11:59 PM</i>	Friday <i>12:00 AM - 11:59 PM</i>
Saturday <i>12:00 AM - 11:59 PM</i>	Sunday <i>12:00 AM - 11:59 PM</i>			

Inspection

Date: *08/13/2018* **Time In:** *10:15 AM* **Time Out:** *1:05 PM* **Purpose:** *Semi-Annual*

Licensure

8.16.2.31 A Licensing Requirements

Non-compliance

The licensee did not obtain background checks on all adult household members living in the home as per the requirements outlined in the department's most current version of the Background Check and Employment History Verification provisions.

Corrective Action Plan

The licensee will obtain background checks on all staff, volunteers, prospective staff and adult household members living in the home.

Regulation: *8.16.2.31.A.3.*

Date to be Completed: *08/14/2018*

Licensure (continued)**8.16.2.31 B Capacity of a Home****Non-compliance**

The home is caring for 3 children under age 2 with no second educator present. Second caregiver was present in the home but left leaving the primary caregiver out of ratio. Second caregiver returned to the home before inspection was completed.

Corrective Action Plan

The home will not provide childcare for more than 2 children under two unless a second qualified educator is present.

Regulation: 8.16.2.31.B.4.

Date to be Completed: 08/13/2018

The home is caring for 7 children with no second educator present. Second caregiver was present in the home but left leaving the primary caregiver out of ratio. Second caregiver returned to the home before inspection was completed.

Corrective Action Plan

The home will not provide childcare for more than 6 children unless a second qualified educator is present.

Regulation: 8.16.2.31.B.4.

Date to be Completed: 08/13/2018

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****Not Inspected****8.16.2.32 C Parent Handbook****Not Inspected****8.16.2.32 D Children's Records****Non-compliance**

Of the 7 children's records reviewed, 3 (1 missing an immunization record, two did not have an approved exemption from NM DOH) is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.32 form for the child(ren) with no immunization/exemption.

Corrective Action Plan

The home will review a child's record to ensure complete information has been obtained before a child is admitted.

Regulation: 8.16.2.32.D.1.e.

Date to be Completed: 09/12/2018

8.16.2.32 E Personnel Records**Compliance**

Administrative Requirements (*continued*)

8.16.2.32 F Personnel Handbook

Compliance

Personnel & Staffing

8.16.2.33 A Personnel and Staffing Requirements

Compliance

8.16.2.33 B Staff Qualifications and Training

Non-compliance

Current educators did not complete the first aid and cardiopulmonary resuscitation (CPR) certification, health and safety training within three (3) months of their date of hire.

Corrective Action Plan

All educators, regardless of the number of hours per week, will complete the above listed training.

Regulation: 8.16.2.33.B.1.

Date to be Completed: 09/12/2018

Services & Care of Children

8.16.2.34 A Guidance

Non-compliance

The home failed to have 1 out of 3 staff sign a form to acknowledge that they have read and understood the policies and procedures outlining the guidance practices.

Corrective Action Plan

The home will provide to all staff the policies and procedures that outline the guidance practices, staff will also sign a form to acknowledge that they have read and understood these policies and procedures.

Regulation: 8.16.2.34.A.1.

Date to be Completed: 09/12/2018

8.16.2.34 B Naps or Rest Period

Compliance

8.16.2.34 C Additional Requirements for Infants and Toddlers

Compliance

8.16.2.34 D Diapering and Toileting

Compliance

8.16.2.34 E Additional Requirements for Children with Special Needs

Compliance

8.16.2.34 F Night Care

Compliance

8.16.2.34 G Physical Environment

Compliance

8.16.2.34 H Social-Emotional Responsive Environment

Compliance

8.16.2.34 I Equipment and Program

Compliance

8.16.2.34 J Outdoor Play

Compliance

8.16.2.34 K Swimming, Wadding and Water

N/A

Food Service (continued)

8.16.2.34 L Field Trips Compliance

Food Service

8.16.2.35 B Meals and Snacks Compliance

8.16.2.35 C Menus Compliance

8.16.2.35 D Kitchens **Non-compliance**

A food in the fridge and freezer is not properly stored; the item is not labeled and dated.

Provider corrected on site.

Corrective Action Plan

Proper food storage practices will be implemented.

Regulation: 8.16.2.35.D.4.

Date to be Completed: 08/13/2018

8.16.2.35 E Meal Times Compliance

Health & Safety Requirements

8.16.2.36 A Hygiene Compliance

8.16.2.36 B First Aid Requirements Not Inspected

8.16.2.36 C Medication Compliance

8.16.2.36 D Illness and Notifiable Diseases Compliance

8.16.2.37 A-G Transportation Requirements for Homes Not Inspected

Buildings, Grounds & Safety

8.16.2.38 A Housekeeping **Non-compliance**

The kitchen/ licensed room has a heavy accumulation of dirt, dust and debris.

Corrective Action Plan

A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards.

Regulation: 8.16.2.38.A.1.

Date to be Completed: 09/12/2018

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

Buildings, Grounds & Safety (continued)

8.16.2.38 F Toilet and Bathing Facilities:

Compliance

8.16.2.38 G Safety Compliance

Non-compliance

The home's fire extinguisher does not have a tag with a date verifying yearly inspection.

Corrective Action Plan

The fire extinguisher will be inspected and have an official tag noting the date of inspection.

Regulation: 8.16.2.38.G.2.

Date to be Completed: 09/12/2018

The home failed to conduct a fire drill for the month(s) of February.

Corrective Action Plan

A monthly fire drill will be held and recorded.

Regulation: 8.16.2.38.G.3.

Date to be Completed: 09/12/2018

8.16.2.38 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

Compliance

8.16.2.38 I Pets

N/A

Additional Comments

None

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: *Nicholas Conde*



Facility Representative: *Dian Newman*