

Center Name: Dian Newman			Address: 2307 E. 2nd St Roswell, NM 88201						<b>Phone:</b> (575)910-	<b>Phone:</b> (575)910-0980	
License Number:	Issue Date:	Expiration I	Date:	Type:				Status:	•		
130826	03/27/2017	03/26/2018		2 Star Group Child Care Home				Licensed			
Capacity				-			Cer	nsus			
Over Age 2: 8	Under Age 2:	4 Night	Care:	0	Playground:	0	Ove	er 2:	0 Ur	nder 2: 0	
Days and Hours of	Operation						-				
	<u>Monday</u>	Tuesda	y W	/ednesda	<u>/</u> Thu	rsda <u>y</u>	Fri	<u>day</u>	Saturday	<u>Sunday</u>	
Opening Times	12:00 AM	12:00 AI	M	12:00 AM	12:0	0 AM	12:0	0 AM	12:00 AM	12:00 AM	
Closing Times	12:00 AM	12:00 AI	M	12:00 AM	12:0	0 AM	12:0	0 AM	12:00 AM	12:00 AM	
# of Classrooms:	F	Purpose:			Date:				Time:		
1	F	follow-up			03/14/20	17			09:40 AM		
Comments											
Follow-up to annual survey dated 02/06/2017.											

Pollow-up to armual survey dated 02/06/2017.						
A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:						
Licensure						
8.16.2.31 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  Deficiencies  The home's policies and procedures regarding the following need to be included: policies and procedures for expulsion of children. The provider wanted further guidance on finalizing her draft of the expulsion policy.  Regulation: 8.16.2.32C(1)(2)  Corrective Action Plan  A parent handbook with required general information and policies and procedures will be completed and distributed.  Date to be Completed: 04/14/2017  8.16.2.32 D CHILDREN'S RECORDS	Non-compliance					
8.16.2.32 E PERSONNEL RECORDS	Compliance					
8.16.2.32 F PERSONNEL HANDBOOK	Not Inspected					
Personnel & Staffing						
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	Not Inspected					
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	Not Inspected					
Services & Care of Children						
8.16.2.34 A GUIDANCE	Not Inspected					

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:				
Dian Newman	130826	03/14/2017				
Service	es & Care of Children					
8.16.2.34 B NAPS OR REST PERIOD	Not Inspected					
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TO		Not Inspected				
8.16.2.34 D DIAPERING AND TOILETING		Not Inspected				
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH	SPECIAL NEEDS		Not Inspected			
8.16.2.34 F NIGHT CARE		Not Inspected				
8.16.2.34 G PHYSICAL ENVIRONMENT	Not Inspected					
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT		Not Inspected				
8.16.2.34 I EQUIPMENT AND PROGRAM		Not Inspected				
8.16.2.34 J OUTDOOR PLAY		Not Inspected				
8.16.2.34 K SWIMMING, WADING AND WATER		Not Inspected				
8.16.2.34 L FIELD TRIPS			Not Inspected			
	Food Service					
8.16.2.35 B MEALS AND SNACKS			Not Inspected			
8.16.2.35 C MENUS			Not Inspected			
8.16.2.35 D KITCHENS			Not Inspected			
8.16.2.35 E MEAL TIMES			Not Inspected			
Health o	& Safety Requirements					
8.16.2.36 A HYGIENE			Not Inspected			
8.16.2.36 B FIRST AID REQUIREMENTS			Not Inspected			
8.16.2.36 C MEDICATION			Not Inspected			
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES		Not Inspected				
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES			Not Inspected			
Buildir	ngs, Grounds & Safety					
8.16.2.38 A HOUSEKEEPING			Compliance			
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	8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL					
8.16.2.38 E EXITS	8.16.2.38 E EXITS					
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, IL	LEGAL DRUGS AND CONTROLLED SUBS	TANCES	Not Inspected			
8.16.2.38 I PETS	Not Inspected					

Survey Report Form Page 2 of 3

 Center Name:
 License Number:
 Date:

 Dian Newman
 130826
 03/14/2017

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.

03/14/2017

Date

Surveyor: Allen Anderson

03/14/2017

Date

Survey Report Form Page 3 of 3

Facility Rep:Dian Newman