

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

| Center Name:  |                    |                             | Address:                      |                 |                     |        | Phone     | Phone:            |          |               |     |
|---|--------------------|-----------------------------|-------------------------------|-----------------|---------------------|--------|-----------|-------------------|----------|---------------|-----|
| Dona Ana Head Start - Vado Center   |                    |                             | 325 Holguin<br>Vado, NM 88072 |                 |                     |        | (575)23   | (575)233-2401     |          |               |     |
| License Number:   | Issue Date:        | Expiration I                | Date:                         | Туре:           |                     |        | Status:   | •                 |          |               |     |
| 86582   | 01/23/2017         | 01/22/2018                  |                               | 2 Star Child    | Care Center         |        | Licensed  |                   |          |               |     |
| Capacity  |                    |                             |                               |                 |                     | Cer    | nsus      |                   |          |               |     |
| Over Age 2: 25  | Under Age 2:       | 0 Night                     | Care:                         | 0 Pla           | ayground: 96        | Ove    | er 2:     | 15                | Under 2: | 0             |     |
| Days and Hours of   | Operation          |                             |                               |                 |                     |        |           |                   |          |               |     |
|   | Monday             | Tuesda                      | <u>y</u> <u>We</u>            | ednesday        | <u>Thursday</u>     |        | day       | <u>Saturday</u>   | <u>/</u> | <u>Sunday</u> |     |
| Opening Times:  |                    | 08:<br>04:00 PM             |                               | 08:<br>04:00 PM | 08:<br>04:00 PM     | Clo    | sed       | Closed            |          | Closed        |     |
| Closing Times   | ·<br>              |                             | VI C                          | J4.00 FIM       |                     |        |           |                   |          |               |     |
| # of Classrooms:  |                    | J <b>rpose:</b><br>Illow-up |                               |                 | Date:<br>09/19/2017 |        |           | Time:<br>10:10 AM |          |               |     |
|   | 10                 |                             |                               |                 | 00/10/2011          |        |           | 10.1074           |          |               |     |
| Comments<br>Follow-Up to Annual inspection conducted on 12/21/2016. All deficiencies are corrected. |                    |                             |                               |                 |                     |        |           |                   |          |               |     |
| A SUR   | EY OF YOUR FACILIT | TY HAS BEEN MA              | DE AND YOU                    | ARE NOTIFIEI    | D OF NON-COMPLIANCE | OF THE | REGULATIO | ONS AS NOTE       | D BELOW: |               |     |
|   |                    |                             |                               | Licen           | isure               |        |           |                   |          |               |     |
| 8.16.2.11 A TYPES OF LICENSES   |                    |                             |                               |                 |                     |        |           |                   | N/A      |               |     |
| 8.16.2.11 B RENEWAL OF LICENSE  |                    |                             |                               |                 |                     |        |           |                   | 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  |                    |                             |                               |                 |                     |        |           | N/A               |          |               |     |
| 8.16.2.21 A LICENSING REQUIREMENTS  |                    |                             |                               |                 |                     |        |           | N/A               |          |               |     |
| 8.16.2.21 B CAPACITY OF CENTERS   |                    |                             |                               |                 |                     |        |           | N/A               |          |               |     |
| 8.16.2.21 C INCIDENT REPORTING REQUIREMENTS   |                    |                             |                               |                 |                     |        |           | N/A               |          |               |     |
| Administrative Requirements   |                    |                             |                               |                 |                     |        |           |                   |          |               |     |
| 8.16.2.22 A ADMINI  | STRATION RECOR     | RDS                         |                               |                 |                     |        |           |                   |          |               | N/A |
| 8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT  |                    |                             |                               |                 |                     |        |           | N/A               |          |               |     |
| 8.16.2.22 C POLICY AND PROCEDURES   |                    |                             |                               |                 |                     |        | Complia   | ance              |          |               |     |
| 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 PERSO   |                    | (                           |                               |                 |                     |        |           |                   |          |               | N/A |
| Personnel & Staffing  |                    |                             |                               |                 |                     |        |           |                   |          |               |     |
| 8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS   |                    |                             |                               |                 | N/A                 |        |           |                   |          |               |     |
| 8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING   |                    |                             |                               |                 |                     |        |           | N/A               |          |               |     |
| 8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES  |                    |                             |                               |                 |                     |        |           |                   | N/A      |               |     |

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|---|--------------------------|---------------------|-----|
|   |                          | 09/19/2017          |     |
| Services & Car  | e 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    |                          | N/A                 |     |
| 8.16.2.24 D DIAPERING AND TOILETING                             | N/A                      |                     |     |
| 8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL N | 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                 |     |
| 8.16.2.24 K SWIMMING, WADING AND WATER                          |                          | N/A                 |     |
| 8.16.2.24 L FIELD TRIPS   |                          |                     | N/A |
| Food Se   | ervice                   |                     |     |
| 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 & Safety   | 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, Grou   | inds & 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                                     | Compliance               |                     |     |
| 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                                   | Compliance               |                     |     |
| 8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRU | N/A                      |                     |     |
| 8.16.2.29 J PETS  |                          |                     | N/A |

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|-----------------------------------|-----------------|------------|
| Dona Ana Head Start - Vado Center | 86582           | 09/19/2017 |

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.

en 11:45

Je lma

09/19/2017

Date

Facility Rep:Thelma Castro

Surveyor:Steven Wells Survey Report Form Date

09/19/2017