



### Facility

**Name:** *Elsa Irma Velazquez* **License Number:** *162703*  
**Address:** *1708 Jay St., Santa Fe, NM 87505*  
**Phone:** *5053166048* **Fax:**  **E-mail:** *irmavelazquez48@gmail.com*

### License Information

**Type:** *2 Star Family Child Care Home* **Status:** *Licensed* **Issue Date:** *08/04/2018* **Expiration Date:** *08/03/2019*

### Capacity

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

### Census

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

### Classrooms

**Number of Classrooms:** *1*

### Days and Hours of Operation

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

### Inspection

**Date:** *01/09/2019* **Time In:** *1:09 PM* **Time Out:** *2:20 PM* **Purpose:** *Semi-Annual*

### Licensure

8.16.2.31 A Licensing Requirements	<i>Compliance</i>
8.16.2.31 B Capacity of a Home	<i>Compliance</i>
8.16.2.31 C Incident Reporting Requirements	<i>Compliance</i>

### Administrative Requirements

8.16.2.32 A Administrative Records	<i>Compliance</i>
8.16.2.32 B Mission, Philosophy and Curriculum Statement	<i>Not Inspected</i>
8.16.2.32 C Parent Handbook	<i>Not Inspected</i>
8.16.2.32 D Children's Records	<i>Compliance</i>

## Administrative Requirements (*continued*)

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	Compliance
8.16.2.33 B Staff Qualifications and Training	<b>Non-compliance</b>

*The home failed to keep a training log on file with employee's name, competency area, source of training, training certificate for 1 out of 1 staff. See Staff Records 8.16.2.32 form for staff who are missing a complete training log.*

### *Corrective Action Plan*

*A training log will be completed for each staff that includes the employee's name, date of hire, and position, date of training, clock hours, competency area, source of training, and training certificates.*

Regulation: 8.16.2.33.B.2.

Date to be Completed: 02/08/2019

*From the review of staff records, it was determined that 1 out of 1 staff working more than 20 hours a week, has/have no documentation of at least 12 hours of annual training in the approved subject areas See Staff Records 8.16.2.32 for staff missing documentation of training.*

### *Corrective Action Plan*

*Annual training will be completed as required and documentation retained on file.*

Regulation: 8.16.2.33.B.3.

Date to be Completed: 02/08/2019

## Services & Care of Children

8.16.2.34 A Guidance	Compliance
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	N/A
8.16.2.34 F Night Care	N/A
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

### Services & Care of Children (*continued*)

8.16.2.34 J Outdoor Play	Compliance
8.16.2.34 K Swimming, Wadding and Water	N/A
8.16.2.34 L Field Trips	N/A

### Food Service

8.16.2.35 B Meals and Snacks	Compliance
8.16.2.35 C Menus	Compliance
8.16.2.35 D Kitchens	Compliance
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	Not Inspected
8.16.2.36 D Illness and Notifiable Diseases	Not Inspected
8.16.2.37 A-G Transportation Requirements for Homes	N/A

### Buildings, Grounds & Safety

8.16.2.38 A Housekeeping	<b>Non-compliance</b>
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*Debris was observed in the eating area. Leftover food was underneath the table.*

*Corrective Action Plan*

*The home and premises will be kept free of debris.*

Regulation: 8.16.2.38.A.1.

Date to be Completed: 02/08/2019

8.16.2.38 B Pest Control	Compliance
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8.16.2.38 C Mechanical Systems	<b>Non-compliance</b>
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*Water coming from a faucet was not below 110 degrees (Fahrenheit).*

*Corrective Action Plan*

*The home will ensure water coming from faucets is below 110 degrees (Fahrenheit) by installing a tempering valve ahead of all domestic water-heater piping.*

*(continued)*

Regulation: 8.16.2.38.C.5.

Date to be Completed: 02/08/2019

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

**Non-compliance**

*The home does not have a 2A10BC fire extinguishers mounted in the kitchen in a visible and easily accessible place.*

*Corrective Action Plan*

*The home will provide a 2A10BC fire extinguisher for the kitchen.*

Regulation: 8.16.2.38.G.2.

Date to be Completed: 02/08/2019

*The home's fire extinguisher does not have a tag with a date verifying yearly inspection. Need a second extinguisher and the other has expired and needs to be tagged.*

*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: 02/08/2019

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

Compliance

8.16.2.38 I Pets

Compliance

**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: Diana Martinez



Facility Representative: Elsa Velazquez