

<b>Center Name:</b> HELP New Mexico - Columbus		<b>Address:</b> 500 Taft Columbus, NM 88029		<b>Phone:</b> (575)531-2599			
<b>License Number:</b> 73968	<b>Issue Date:</b> 01/10/2017	<b>Expiration Date:</b> 01/9/2018	<b>Type:</b> 2 Star Child Care Center	<b>Status:</b> Licensed			
<b>Capacity</b>				<b>Census</b>			
Over Age 2: 18	Under Age 2: 0	Night Care: 0	Playground: 18	Over 2: 9	Under 2: 0		
<b>Days and Hours of Operation</b>							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	Closed	Closed	Closed	Closed	Closed	Closed	Closed
Closing Times:							
<b># of Classrooms:</b> 1	<b>Purpose:</b> Semi-Annual		<b>Date:</b> 04/21/2017	<b>Time:</b> 01:15 PM			
<b>Comments</b>							

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	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	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	N/A
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.22 C POLICY AND PROCEDURES	Not Inspected
8.16.2.22 D FAMILY HANDBOOK	Not Inspected
8.16.2.22 E CHILDREN'S RECORDS	Not Inspected
8.16.2.22 F PERSONNEL RECORDS	Non-compliance

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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 1 out of 4 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information. (one staff has not had a background check in the last five years )</p> <p><b>Regulation:</b> 8.16.2.22F(1)(e)</p> <p><b><u>Corrective Action Plan</u></b> The center will obtain documentation of a background check.</p> <p><b>Date to be Completed:</b> 04/28/2017</p>		
<b>8.16.2.22 G PERSONNEL HANDBOOK</b>		Not Inspected
<b>Personnel &amp; Staffing</b>		
<p><b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b></p> <p><b><u>Deficiencies</u></b> There is no director or co-director at the center a minimum of 50% of the center's core hours of operation.</p> <p><b>Regulation:</b> 8.16.2.23A(7)</p> <p><b><u>Corrective Action Plan</u></b> The director or qualified Co-Director will be on site 50% of the center's core hours</p> <p><b>Date to be Completed:</b> 04/24/2017</p>		Non-compliance
<b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b>		Not Inspected
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>		Compliance
<b>Services &amp; Care of Children</b>		
<b>8.16.2.24 A GUIDANCE</b>		Compliance
<b>8.16.2.24 B NAPS OR REST PERIOD</b>		Not Inspected
<b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b>		N/A
<b>8.16.2.24 D DIAPERING AND TOILETING</b>		Compliance
<b>8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS</b>		Compliance
<b>8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE</b>		N/A
<b>8.16.2.24 G PHYSICAL ENVIRONMENT</b>		Compliance
<b>8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT</b>		Compliance
<b>8.16.2.24 I EQUIPMENT AND PROGRAM</b>		Compliance
<b>8.16.2.24 J OUTDOOR PLAY AREAS</b>		Compliance
<b>8.16.2.24 K SWIMMING, WADING AND WATER</b>		N/A
<b>8.16.2.24 L FIELD TRIPS</b>		N/A
<b>Food Service</b>		
<b>8.16.2.25 B MEALS AND SNACKS</b>		Compliance
<b>8.16.2.25 C MENUS</b>		Compliance
<b>8.16.2.25 D KITCHENS</b>		Compliance

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<b>Food Service</b>		
8.16.2.25 E MEAL TIMES		Compliance
<b>Health &amp; Safety Requirements</b>		
8.16.2.26 A HYGIENE		Compliance
8.16.2.26 B FIRST AID REQUIREMENTS		Not Inspected
8.16.2.26 C MEDICATION		N/A
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		Compliance
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS		N/A
<b>Buildings, Grounds &amp; Safety</b>		
8.16.2.29 A HOUSEKEEPING		Compliance
8.16.2.29 B PEST CONTROL		N/A
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 <b>Deficiencies</b> The center does not have verification of an annual fire inspection from the fire authority having jurisdiction. <b>Regulation:</b> 8.16.2.29H(3)(e) <b>Corrective Action Plan</b> An annual fire inspection will be requested from the fire authority having jurisdiction over the center. <b>Date to be Completed:</b> 05/21/2017 <b>Deficiencies</b> The center failed to document a fire drill for the month(s) of February; March. <b>Regulation:</b> 8.16.2.29H(2) <b>Corrective Action Plan</b> A monthly fire drill will be held and recorded. <b>Date to be Completed:</b> 05/21/2017		Non-compliance
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.29 J PETS		N/A

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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.

*Emma Gonzales* 2:02

04/21/2017

*on file*

04/21/2017

Surveyor: Emma Gonzales	Date	Facility Rep: Yaneth Contreras	Date
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