

Facility				
Name: Janeth Lucero				License Number: 123805
Address: 106 East Circle,	Ruidoso Downs, NM	88346		
Phone: 5753789140	Fax: n/a	E-mail: jane	tlucero14@yaho	o.com
License Information				
Type : 2 Star Group Child Care Home	Status: Licensed	Issue Date:	08/01/2017	Expiration Date: 07/31/2018
Capacity				
Over Age 2: <i>8</i> Square Footage: <i>0</i>	Under Age 2:4	Night Care:	0	Playground: 0
Census				
Over 2: 2	Under 2: <i>0</i>			
Classrooms				
Number of Classrooms:	1			
Days and Hours of Operati	on			
Monday	Tuesday	Wednesday	Thursday	r Friday
7:30 AM - 5:30 PM 7	:30 AM - 5:30 PM	7:30 AM - 5:30 PM	7:30 AM - 5:3	0 PM 7:30 AM - 5:30 PM
Saturday Closed	Sunday Closed			
Inspection				
Date: 05/16/2018	Time In: 10:52 AM	Time Out: 1	1:48 AM	Purpose: Annual
Licensure				
8.16.2.31 A Licensing Re	equirements			Compliance
8.16.2.31 B Capacity of a Home Compl				
8.16.2.31 C Incident Reporting Requirements Not In				

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8.16.2.32 A Administrative Records Non-compliance The licensee does not have on file the following: the current child care regulations. Corrective Action Plan All required items will be on file for review. Date to be Completed: 06/15/2018 8.16.2.32 B Mission, Philosophy and Curriculum Statement

8.16.2.32 C Parent Handbook

Administrative Requirements

8.16.2.32 D Children's Records

Of the 9 children's records reviewed, 9 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.

Date to be Completed: 06/15/2018

Of the 9 children's records reviewed, 9 is/are missing an enrollment agreement form signed by the parent or quardian with an outline of services and costs. See the Children's Records 8.16.2.32 form for the child(ren) with missing information.

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

Date to be Completed: 06/15/2018

8.16.2.32 E Personnel Records

8.16.2.32 F Personnel Handbook

Personnel & Staffing

8.16.2.33 A Personnel and Staffing Requirements

Not Inspected

Compliance

Compliance

Not Inspected

Non-compliance

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8.16.2.33 B Staff Qualifications and Training

Personnel & Staffing (continued)

From the review of staff records, it was determined that 2 out of 2 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.

Date to be Completed: 06/15/2018

Services & Care of Children		
8.16.2.34 A Guidance	Compliance	
8.16.2.34 B Naps or Rest Period	Not Inspected	
8.16.2.34 C Additional Requirements for	or Infants and Toddlers	N/A
8.16.2.34 D Diapering and Toileting		Compliance
8.16.2.34 E Additional Requirements for	Not Inspected	
8.16.2.34 F Night Care	N/A	
8.16.2.34 G Physical Environment	Compliance	
8.16.2.34 H Social-Emotional Responsi	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 W	N/A	
8.16.2.34 L Field Trips		N/A
Food Service		
8.16.2.35 B Meals and Snacks		Not Inspected
8.16.2.35 C Menus		Compliance
8.16.2.35 D Kitchens	Compliance	
8.16.2.35 E Meal Times	Not Inspected	
Health & Safety Requirements		
8.16.2.36 A Hygiene		Compliance
8.16.2.36 B First Aid Requirements		Compliance
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Non-compliance

Health & Safety Requirements (continued)				
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	Compliance			
Buildings, 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	Compliance			
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'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.				
Date to be Completed: 06/15/2018				

8.16.2.38 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances Not Inspected

8.16.2.38 | 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.

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LANERI JACEDO

Surveyor: Sandra Connolly

Facility Representative: Janeth Lucero