Center Name:		Address: 1456 Gutierrez Rd.					Phone:					
Joanne Jaramillo			Bernalillo, NM 87004					(505)867-1577				
License Number:	Issue Date:	Expiration	Date:	Type:			Status:					
69424	06/13/2016	06/12/2017	5/12/2017 2 Star Group Child Care Home Licensed									
Capacity	Census											
Over Age 2: 8	Under Age 2:	4 Night	Care:	0 P	layground: 0	Ove	er 2:	11	Under	2: 0		
Days and Hours of	Operation					-						
	<u>Monday</u>	Tuesda	ay W	<u>/ednesday</u>	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>S</u>	Saturday	Sunday		
Opening Times	06:00 AM	06:00 A	M (06:00 AM	06:00 AM	06:0	06:00 AM) AM Closed		Closed	Closed
Closing Times	: 02:00 AM	02:00 A	M (02:00 AM	02:00 AM	02:0	0 AM					
# of Classrooms:		Purpose:			Date:			Tim	ie:			
1		Follow-up			05/23/2017			12:0	00 PM			
Comments												
This is an onsite follow up to the annual inspection.												

This is an onsite follow up to the annual inspection.				
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	Not Inspected			
8.16.2.32 D CHILDREN'S RECORDS Deficiencies Of the 5 children's records reviewed, 2 is/are missing the date the child first attended the home. See Children's Records 8.16.2.32 form for the child(ren) with missing information and/or authorization. Regulation: 8.16.2.32D(1)(d)	Non-compliance			
Corrective Action Plan The first attendance date will be added. Date to be Completed: 05/30/2017				
Deficiencies Of the 13 children's records reviewed, 3 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. Regulation: 8.16.2.32D(1)(e)				
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: 05/30/2017				

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:
Joanne Jaramillo	69424	05/23/2017

Administrative Requirements

Deficiencies

Of the 4 children's records reviewed, 1 is/are missing the name and telephone number of two people in the local area to contact in an emergency when a parent or guardian cannot be reached. See Children's Records 8.16.2.32form for the child(ren) with missing information.

Regulation: 8.16.2.32D(2)(b)

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: 05/30/2017

Date to be Completed: 05/30/2017					
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	Compliance				
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 INFANTS AND TODDLERS	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	Compliance				
8.16.2.35 D KITCHENS	Not Inspected				
8.16.2.35 E MEAL TIMES	Not Inspected				
Health & 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				

Survey Report Form Page 2 of 3

Center Name: Joanne Jaramillo	License Number: 69424	Date: 05/23/2017			
Health & Safety Requirements					
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES			Not Inspected		
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			Not Inspected		
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL			Not Inspected		
8.16.2.38 E EXITS			Not Inspected		
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, ILLEGAL DRUGS	S AND CONTROLLED SUB	STANCES	Not Inspected		
8.16.2.38 PETS			Not Inspected		

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.

7

Surveyor:Kia Kennedy

05/23/2017

Date

Johns Javamillo

Facility Rep:Joanne Jaramillo

05/23/2017

Date

Survey Report Form Page 3 of 3