



Facility

Name: *Kid's Kountry Place* **License Number:** *123285*
Address: *3704 Elks Drive, Las Cruces, NM 88005*
Phone: *5755258667* **Fax:** **E-mail:** *crystalcardenas@1987@yahoo.com*

License Information

Type: *3 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *08/01/2018* **Expiration Date:** *07/31/2019*

Capacity

Over Age 2: *92* **Under Age 2:** *18* **Night Care:** *0* **Playground:** *0*
Square Footage: *0*

Census

Over 2: *53* **Under 2:** *9*

Classrooms

Number of Classrooms: *5*

Days and Hours of Operation

Monday <i>6:30 AM - 6:00 PM</i>	Tuesday <i>6:30 AM - 6:00 PM</i>	Wednesday <i>6:30 AM - 6:00 PM</i>	Thursday <i>6:30 AM - 6:00 PM</i>	Friday <i>6:30 AM - 6:00 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *01/22/2019* **Time In:** *2:45 PM* **Time Out:** *4:00 PM* **Purpose:** *Other*

Licensure

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	Compliance
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	Compliance
8.16.2.21 B Capacity of Centers	Compliance

Licensure (*continued*)

8.16.2.21 C Incident Reporting Requirements	<i>Compliance</i>
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Administrative Requirements

8.16.2.22 A Administrative Records	<i>N/A</i>
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8.16.2.22 B Mission, Philosophy and Curriculum Statement	<i>N/A</i>
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8.16.2.22 C Policy and Procedures	<i>N/A</i>
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8.16.2.22 D Family Handbook	<i>N/A</i>
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8.16.2.22 E Children's Records	<i>N/A</i>
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8.16.2.22 F Personnel Records	<i>N/A</i>
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8.16.2.22 G Personnel Handbook	<i>N/A</i>
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Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements	<i>Compliance</i>
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8.16.2.23 B Staff Qualifications and Training	<i>N/A</i>
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8.16.2.23 C Staff/Child Ratios and Group Sizes	<i>Compliance</i>
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Services & Care of Children

8.16.2.24 A Guidance	<i>N/A</i>
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8.16.2.24 B Naps or Rest Period	<i>N/A</i>
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8.16.2.24 C Additional Requirements for Infants and Toddlers	<i>N/A</i>
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8.16.2.24 D Diapering and Toileting	<i>N/A</i>
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8.16.2.24 E Additional Requirements for Children with Special Needs	<i>N/A</i>
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8.16.2.24 F Additional Requirements for Night Care	<i>N/A</i>
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8.16.2.24 G Physical Environment	<i>N/A</i>
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8.16.2.24 H Social-Emotional Responsive Environment	<i>N/A</i>
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8.16.2.24 I Equipment and Program	<i>N/A</i>
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8.16.2.24 J Outdoor Play Areas	<i>N/A</i>
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8.16.2.24 K Swimming, Wading and Water	<i>N/A</i>
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8.16.2.24 L Field Trips	<i>N/A</i>
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Food Service

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	Compliance

Buildings, Grounds & 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	N/A
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	N/A
8.16.2.29 H3(f)(i)(k) Safety Compliance	N/A
8.16.2.29 J Pets	N/A

Additional Comments

This survey is to monitor Conditions of Operation. Facility is in compliance with the Conditions on this visit. Facility has been in compliance with the Conditions of Operations. Conditions of Operations is lifted.

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: *Steven Wells*



Facility Representative: *Crystal Chavez*