

Facility					
Name: Kid's Kountry Place			Lic	ense Number: 123285	
Address: 3704 Elks Driv	ve, Las Cruces, NM 8800	05			
Phone: 5755258667	Fax:	E-mail: bacakatrina325@gmail.com			
License Information					
<b>Type</b> : 3 Star FOCUS Chi Care Center	ld Status: Licensed	lssue Date: 08/01/2017		Expiration Date: 07/31/2018	
Capacity					
Over Age 2: <i>92</i> Square Footage: <i>0</i>	Under Age 2: <i>18</i>	Night Care	: O Pla	yground: 0	
Census					
Over 2: 62	Under 2: 13				
Classrooms					
Number of Classroom	s: 5				
Days and Hours of Opera	ation				
Monday 6:30 AM - 6:00 PM	Tuesday 6:30 AM - 6:00 PM	Wednesday 6:30 AM - 6:00 PM	Thursday 6:30 AM - 6:00 PM	Friday 1 6:30 AM - 6:00 PM	
Saturday Closed	Sunday Closed				
Inspection Date: <i>05/23/2018</i>	Time In: 2:20 PM	Time Out:	3:45 PM Pu	rpose: Other	

nsure	
5.2.11 A Types of Licenses	N/A
5.2.11 B Renewal of License	N/A
5.2.11 D Non-transferable Restrictions of License	N/A
5.2.12 A, K, M Licensing Actions and Administrative Appeals	Compliance
5.2.17 E, F Surveys for Child Care Facilities	N/A
5.2.18 D Complaints	N/A
5.2.21 A Licensing Requirements	Compliance
5.2.21 B Capacity of Centers	Compliance
5.2.21 C Incident Reporting Requirements	Compliance
inistrative Requirements	
5.2.22 A Administrative Records	N/A
5.2.22 B Mission, Philosophy and Curriculum Statement	N/A
5.2.22 C Policy and Procedures	N/A
5.2.22 D Family Handbook	N/A
5.2.22 E Children's Records	N/A
5.2.22 F Personnel Records	N/A
5.2.22 G Personnel Handbook	N/A
onnel & Staffing	
5.2.23 A Personnel and Staffing Requirements	Compliance
5.2.23 B Staff Qualifications and Training	Compliance
5.2.23 C Staff/Child Ratios and Group Sizes	Compliance
ices & Care of Children	
5.2.24 A Guidance	N/A
5.2.24 B Naps or Rest Period	N/A
5.2.24 C Additional Requirements for Infants and Toddlers	N/A
5.2.24 D Diapering and Toileting	N/A
5.2.24 E Additional Requirements for Children with Special Needs	N/A
5.2.24 F Additional Requirements for Night Care	N/A

Services & Care of Children (continued)		
8.16.2.24 G Physical Environment	N/A	
8.16.2.24 H Social-Emotional Responsive Environment		
8.16.2.24 I Equipment and Program	N/A	
8.16.2.24 J Outdoor Play Areas	N/A	
8.16.2.24 K Swimming, Wadding and Water	N/A	
8.16.2.24 L Field Trips	N/A	
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		
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	
9 16 2 20 H Safaty Compliance	N/A	
8.16.2.29 H Safety Compliance		
8.16.2.29 H Safety Compliance 8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances	N/A	

This survey is to monitor Conditions of Operation. Facility is in compliance with Conditions of Operation on this visit.

## 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: Katrina Baca