Center Name: Kid's Kountry Place			Address: 3704 Elks Drive Las Cruces, NM 88005				Phone: (575)525-8667		
License Number:	Issue Date:	Expiration I	Date:	Туре:			Status:		
123285	08/1/2017	07/31/2018		3 Star FOCUS Child Care Center			Licensed		
Capacity				•		Cei	nsus		
Over Age 2: 92	Under Age 2:	18 Night	t Care: 0 Playground: 0			Ove	er 2: 30	Und	er 2: 18
Days and Hours of Operation									
	<u>Monday</u>	Tuesda	<u>y</u> <u>W</u>	ednesday	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	Saturday	<u>Sunday</u>
Opening Times:	06:30 AM	06:30 AI	M (06:30 AM	06:30 AM	06:3	0 AM	Closed	Closed
Closing Times	06:00 PM	06:00 PI	M (06:00 PM	06:00 PM	06:0	0 PM		
# of Classrooms:	Р	urpose:			Date:		Tir	ne:	
5	Ir	icident Investigati	on		12/01/2017		11:	30 AM	
Comments Facility was imposed	I a sanction and p	laced on conditi	ons of oper	ation.					

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW: Licensure Compliance 8.16.2.11 A TYPES OF LICENSES 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 Non-compliance **Deficiencies** The licensing department may initiate negative licensing action based on violations of regulations that place the health, safety or welfare of children at risk. Regulation: 8.16.2.12A **Corrective Action Plan** The licensee will comply with all conditions of operation to ensure correction and ongoing compliance with all licensing requirements. Date to be Completed: 12/01/2017 8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES N/A **8.16.2.18 D COMPLAINTS** Compliance Compliance 8.16.2.21 A LICENSING REQUIREMENTS 8.16.2.21 B CAPACITY OF CENTERS Compliance 8.16.2.21 C INCIDENT REPORTING REQUIREMENTS Non-compliance **Deficiencies** The center failed to make a report to the licensing authority within 24 hours after the incident occurred regarding a child that was not picked up at school. **Regulation:** 8.16.2.21 C **Corrective Action Plan** The center will make an immediate report by phone and follow-up in writing within 24 hours of any incident that threatens the health and safety of children and staff members. Date to be Completed: 12/01/2017

Survey Report Form Page 1 of 3

Center Name: Kid's Kountry Place	License Number:	Date: 12/01/2017		
		12/01/2017	12/01/2017	
	ve Requirements	T		
8.16.2.22 A ADMINISTRATION RECORDS			N/A	
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT			N/A	
8.16.2.22 C POLICY AND PROCEDURES			N/A	
8.16.2.22 D FAMILY HANDBOOK			N/A	
8.16.2.22 E CHILDREN'S RECORDS			N/A	
8.16.2.22 F PERSONNEL RECORDS			N/A	
8.16.2.22 G PERSONNEL HANDBOOK		N/A		
Personn	el & Staffing			
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS Deficiencies A preschool child was left unattended in a closed van. Regulation: 8.16.2.23A(9) Corrective Action Plan Requirements for supervision of children whether inside or outsid reviewed with staff. Date to be Completed: 12/01/2017	e the facility will be		Non-compliance	
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING			N/A	
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES			N/A	
Services &	Care of Children			
8.16.2.24 A GUIDANCE			N/A	
8.16.2.24 B NAPS OR REST PERIOD			N/A	
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLE	RS		N/A	
8.16.2.24 D DIAPERING AND TOILETING			N/A	
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECI	AL NEEDS		N/A	
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE			N/A	
8.16.2.24 G PHYSICAL ENVIRONMENT			N/A	
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT			N/A	
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, WADING AND WATER			N/A	
8.16.2.24 L FIELD TRIPS			N/A	
Food	d 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	

Survey Report Form Page 2 of 3

Center Name:	License Number:	Date:	
Kid's Kountry Place	123285	12/01/2017	
Health & Sa	afety 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		N/A	
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 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGA	TANCES	N/A	
8.16.2.29 J PETS			N/A

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.

12/01/2017

Date

Surveyor:Emma Gonzales

12/01/2017

Date

Survey Report Form Page 3 of 3

Facility Rep:Crystal Cardenas