

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Contor Nama:			1	VEY REPOR					Phone		
Center Name:			Address: 3900 Del Rey					Phone: (575)652-4535			
Kids Kountry Del Rey			Las Cruces, NM 88001				(575)65	2-4535			
License Number:	Issue Date:	Expiration	Date:	Туре:			Statu				
163609	01/8/2017	01/7/2018		2 Star + Ch	ild Care Center		Licens	ed			
Capacity							Census				
Over Age 2: 91	Under Age 2:	38 Nigh	t Care:	0 P	layground: 12	29	Over 2:	45		Under 2:	24
Days and Hours of	Operation										
Opening Times	<u>Monday</u> : 06:30 AM			<u>Vednesday</u> 06:30 AM	<u>Thursday</u> 06:30 AM		<u>Friday</u> 6:30 AM	<u>.</u>	<u>Saturday</u> Closed		<u>Sunday</u> Closed
Closing Times				06:00 PM	06:00 PM		6:00 PM		Closed		Closed
# of Classrooms:		Purpose:			Date:			Tin	ne:		
6	Complaint 06/15/2017 01:35 Pl			35 PM							
Comments											
	VEY OF YOUR FAC	ILITY HAS BEEN M	ADE AND YOU	J ARE NOTIFIE	D OF NON-COMPLI	ANCE OF	THE REGUL	ATIONS	AS NOTED	BELOW:	
				Lice	nsure						
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							N/A				
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							N/A				
8.16.2.21 B CAPACITY OF CENTERS							N/A				
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS						N	on-compliance				
Deficiencies											
The center failed to notify parents or guardians in writing of an incident regarding ; a											
educator noticed a scratch on a child's forehead but failed to submit written documentation to the educator relieving her for duty or for the parents.											
Regulation: 8.16			, per enter								
<u>Corrective Action Plan</u> Parents or guardians will be notified in writing of an incident that threatened or could have threatened the health or safety of children in the center.											
Date to be Comp	leted: 07/02/2017										
			Adm	inistrative	Requiremen	ts					
8.16.2.22 A ADMINI	STRATION REC	ORDS									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					

Center Name:	License Number:	Date:	
Kids Kountry Del Rey	163609	06/15/2017	
Adr	ninistrative Requirements		
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
	Personnel & Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS			N/A
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING			N/A
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES			N/A
Se	rvices & Care of Children	ł	
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 AN	D TODDLERS		N/A
8.16.2.24 D DIAPERING AND TOILETING		N/A	
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN W		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 ENVIRONME		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 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
Hea	Ith & 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 CEN		N/A	
Bui	ildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING	<u>.</u>		N/A
8.16.2.29 B PEST CONTROL			N/A
		Page 2	

Survey Report Form

Center Name: Kids Kountry Del Rey	License Number: 163609	Date: 06/15/2017	
Buildings,	Grounds & Safety		
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	L DRUGS AND CONTROLLED SUBS	TANCES	N/A
8.16.2.29 J PETS			N/A

	-	6.2, failure to comply with the corrective action plans as noted inst the licensee.
1	_	

Septer Etrate	06/15/2017	Porch Roma	06/15/2017
Surveyor:Crystal Estrada	Date	Facility Rep:Priscilla Rouse	Date