Center Name: Kristin Moore			Address: 2209 E. 14th St. Clovis, NM 88101				<b>Phone:</b> (575)799-6	<b>Phone:</b> (575)799-6019	
License Number:	Issue Date:	Expiration	Date:	Туре:			Status:		
84745	09/1/2017	11/30/2017		2 Star Grou	p Child Care Home		Licensed		
Capacity			•			Cei	nsus		
Over Age 2: 7	Under Age 2:	2 Night	Care:	0 Pl	ayground: 0	Ove	er 2:	1 Und	der 2: 1
Days and Hours of	Operation					•			
	Monday	Tuesda	<u>w</u> We	ednesday	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>Saturday</u>	Sunday
Opening Times	: 07:30	07:30		07:30	07:30	07	:30	Closed	Closed
Closing Times	: 05:30 P	05:30 F	, ,	05:30 P	05:30 P	05:	30 P		
# of Classrooms:		Purpose:			Date:			Time:	
2 Annual			11/30/2017				09:10 AM		
Comments									

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	Compliance	
8.16.2.31 B CAPACITY OF A HOME	Compliance	
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Not Inspected	
Administrative Requirements		
8.16.2.32 A ADMINISTRATIVE RECORDS	Compliance	
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance	
8.16.2.32 C PARENT HANDBOOK	Compliance	
8.16.2.32 D CHILDREN'S RECORDS	Compliance	
Deficiencies The home does not have a written plan for on going professional development for each staff member, including the director, that is based on the seven areas of competency, consistent with the career lattice, and based on the individual's goals.  Regulation: 8.16.2.32E(4)  Corrective Action Plan  A written plan for employee development will be developed.  Date to be Completed: 12/29/2017	Non-compliance	

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:
Kristin Moore	84745	11/30/2017

# **Administrative Requirements**

# **Deficiencies**

Home educators do not have a signed statement that they would or would not be disqualified as a direct provider of care under the most current version of the Background Checks and Employment History Verification provisions pursuant to 8.8.3 NMAC.

**Regulation:** 8.16.2.32 E(2)

# **Corrective Action Plan**

Documentation of an annual statement concerning disqualification will be obtained for each educator.

Date to be Completed: 12/29/2017

8.16.2.32 F PERSONNEL HANDBOOK	Compliance
Personnel & Staffing	
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	Non-compliance
<u>Deficiencies</u>	
The home failed to keep a training log on file with employee's name; date of hire; position;	
date of training; clock hours; competency area; source of training for 2 out of 2 staff. See Staff Records 8.16.2.32 form for staff who are missing a complete training log.	
Regulation: 8.16.2.33B(2)	
Corrective Action Plan	
A training log will be completed for each staff that includes the employee 's name, date of	
hire, and position, date of training, clock hours, competency area, source of training, and	
training certificates.	
Date to be Completed: 12/29/2017	
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	Compliance
8.16.2.34 D DIAPERING AND TOILETING	Compliance
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Not Inspected
8.16.2.34 F NIGHT CARE	N/A
8.16.2.34 G PHYSICAL ENVIRONMENT	Compliance
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Compliance
8.16.2.34 I EQUIPMENT AND PROGRAM	Compliance
8.16.2.34 J OUTDOOR PLAY	Compliance
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	Compliance
8.16.2.35 C MENUS	Non-compliance

Survey Report Form Page 2 of 3

 Center Name:
 License Number:
 Date:

 Kristin Moore
 84745
 11/30/2017

## **Food Service**

# **Deficiencies**

Weekly menus are not dated and posted in an area easily visible to parents.

**Regulation:** 8.16.2.35C(1)

### **Corrective Action Plan**

A dated weekly menu will be posted in an area visible to parents. Menus shall be posted at least one week in advance, in a conspicuous place, for review by parents, educators and children.

Date to be Completed: 12/29/2017

8.16.2.35 D KITCHENS	Compliance
8.16.2.35 E MEAL TIMES	Compliance
Health & Safety Requirements	
8.16.2.36 A HYGIENE	Compliance
8.16.2.36 B FIRST AID REQUIREMENTS	Compliance
8.16.2.36 C MEDICATION	Not Inspected
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES	Not Inspected
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES	N/A
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	Compliance
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL	Compliance
8.16.2.38 E EXITS	Compliance
8.16.2.38 F TOILET AND BATHING FACILITIES	Compliance
8.16.2.38 G SAFETY COMPLIANCE	Compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.38   PETS	Compliance
	-

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.

11/30/2017

11/30/2017

Surveyor:Susie Aragon

1 Man 10:20

Date

Facility Rep:Kristin Moore

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Date