



Facility

Name: *Little Tumbleweed Daycare Too* **License Number:** *158097*
Address: *253 Chimuri, La Mesa, NM 88044*
Phone: *5752333380* **Fax:** **E-mail:** *sheriseay@yahoo.com;*
shelly.allison20@gmail.com

License Information

Type: *2 Star + Child Care Center* **Status:** *Licensed* **Issue Date:** *08/26/2018* **Expiration Date:** *08/25/2019*

Capacity

Over Age 2: *28* **Under Age 2:** *21* **Night Care:** *0* **Playground:** *52*
Square Footage: *0*

Census

Over 2: *5* **Under 2:** *0*

Classrooms

Number of Classrooms: *3*

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: *12/27/2018* **Time In:** *9:50 AM* **Time Out:** *10:25 AM* **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	N/A
8.16.2.17 E, F Surveys for Child Care Facilities	N/A
8.16.2.18 D Complaints	N/A

Licensure (continued)**8.16.2.21 A Licensing Requirements****Non-compliance**

*The licensee did not obtain background checks on all staff members, educators, volunteers, and prospective staff as per the requirements outlined in the department's most current version of the Background Check and Employment History Verification provisions. **While conducting a visit towards the beginning of the month, a surveyor discovered two employee's background clearances were expired.*

Corrective Action Plan

The licensee will obtain background checks on all staff members, volunteers, and prospective staff. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC at least once every five years on all required individuals.

***CORRECTED. Facility submitted background clearance applications and fingerprints. Per EPICS employees were cleared on 12/24/18 and 12/26/18.*

Regulation: 8.16.2.21.A.2.

Date to be Completed: 12/27/2018

8.16.2.21 B Capacity of Centers*Compliance***8.16.2.21 C Incident Reporting Requirements***Compliance***Administrative Requirements****8.16.2.22 A Administrative Records***Compliance***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***Compliance***8.16.2.22 G Personnel Handbook***N/A***Personnel & Staffing****8.16.2.23 A Personnel and Staffing Requirements***Compliance***8.16.2.23 B Staff Qualifications and Training***N/A***8.16.2.23 C Staff/Child Ratios and Group Sizes***Compliance***Services & Care of Children****8.16.2.24 A Guidance***N/A***8.16.2.24 B Naps or Rest Period***N/A*

Services & Care of Children (*continued*)

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

Food Service

8.16.2.25 B Meals and Snacks	<i>N/A</i>
8.16.2.25 C Menus	<i>N/A</i>
8.16.2.25 D Kitchens	<i>N/A</i>
8.16.2.25 E Meal Times	<i>N/A</i>

Health & Safety Requirements

8.16.2.26 A Hygiene	<i>N/A</i>
8.16.2.26 B First Aid Requirements	<i>N/A</i>
8.16.2.26 C Medication	<i>N/A</i>
8.16.2.27 A-D Illness Requirements for Centers	<i>N/A</i>
8.16.2.28 A-H Transportation Requirements for Centers	<i>Compliance</i>

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping	<i>N/A</i>
8.16.2.29 B Pest Control	<i>N/A</i>
8.16.2.29 C Mechanical Systems	<i>N/A</i>
8.16.2.29 D Water and Waste	<i>N/A</i>
8.16.2.29 E Lighting, Lighting Fixtures and Electrical	<i>N/A</i>

Buildings, Grounds & Safety (continued)

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

Visit was in reference to the conditions of operation for the month of December, all conditions are being met except for those noted on the survey.

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.

*Crystal Patton
10:25am*

Surveyor: *Crystal Patton*

*Signature
on File*

Facility Representative: *Shelly Mendoza*