Center Name:			Address: 367 Timor Rd SE					Phone:		
LouAnn Murray			Rio Rancho, NM 87124					(505)892-1184		
License Number:	Issue Date:	Expiration	Date:	Type:			Status:			
55521	04/3/2017	04/2/2018	2 Star Group Child Care Home				Licensed			
Capacity				•		Cer	nsus			
Over Age 2: 8	Under Age 2:	4 Night	Care:	0 PI	ayground: 0	Ove	er 2:	2	Unde	r 2: 1
Days and Hours of Operation										
	<u>Monday</u>	Tuesda	y W	<u>/ednesday</u>	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>s</u>	aturday	<u>Sunday</u>
Opening Times	06:00 AM	06:00 Al	M (	06:00 AM	06:00 AM	06:0	0 AM		Closed	Closed
Closing Times	: 06:30 PM	06:30 PI	M (	06:30 PM	06:30 PM	06:3	:30 PM			
# of Classrooms:	l i	Purpose:			Date:			Tim	e:	
1	,	Annual			02/13/2018			10:1	5 AM	
Comments Providers CPR/FA expires in March 2018; Providers CRC expires 12/2018										

Providers CPR/FA expires in March 2018; Providers CRC expires 12/2018				
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 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	Non-compliance			
<u>Deficiencies</u>				
The licensee does not have on file the following: the latest licensing inspection report.				
<b>Regulation:</b> 8.16.2.32A(1)-(5)				
Corrective Action Plan				
All required items will be on file for review.				
Date to be Completed: 03/13/2018				
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected			
8.16.2.32 C PARENT HANDBOOK	Not Inspected			
8.16.2.32 D CHILDREN'S RECORDS	Non-compliance			
<u>Deficiencies</u>				
Of the 3 children's records reviewed, 2 is/are missing a list of people authorized to pick up				
the child and an authorization form signed by the parent or guardian. See Children's Records				
8.16.2.32 form for the child(ren) with missing information and/or authorization.				
Regulation: 8.16.2.32D(1)(c)				
Corrective Action Plan				
The home will review a child's record to ensure complete information has been obtained				
before a child is admitted.				
Date to be Completed: 03/13/2018				

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Center Name:	License Number:	Date:	
LouAnn Murray	55521	02/13/2018	

### **Administrative Requirements**

### **Deficiencies**

Of the 3 children's records reviewed, 1 is/are missing the date the child first attended the home. See Children's Records 8.16.2.32 form for the child(ren) with missing information and/or authorization.

**Regulation:** 8.16.2.32D(1)(d)

# **Corrective Action Plan**

The first attendance date will be added.

Date to be Completed: 03/13/2018

#### **Deficiencies**

Of the 3 children's records reviewed, 2 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.32 form for the child(ren) with no immunization/exemption.

**Regulation:** 8.16.2.32D(1)(e)

### **Corrective Action Plan**

The home will review a child's record to ensure complete information has been obtained before a child is admitted.

Date to be Completed: 03/13/2018

- 110 to 20 completed co. 10 co				
8.16.2.32 E PERSONNEL RECORDS	Compliance			
8.16.2.32 F PERSONNEL HANDBOOK	Not Inspected			
Personnel & Staffing				
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance			
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	Compliance			
Services & Care of Children				
8.16.2.34 A GUIDANCE	Compliance			
8.16.2.34 B NAPS OR REST PERIOD	Compliance			
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	Non-compliance			
Deficiencies The home does not have a crib for each infant in care that is in good repair and that meets federal standards. The home has 2 cribs that meet requirements and 1 are needed. Crib does not have wheels for evacuation.  Regulation: 8.16.2.34C(I)(2)  Corrective Action Plan An adequate number of suitable cribs will be provided.  Date to be Completed: 03/13/2018				
8.16.2.34 D DIAPERING AND TOILETING	Compliance			
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Compliance			
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			

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Center Name: LouAnn Murray	License N 55521	lumber:	<b>Date:</b> 02/13/2018	
			02/10/2010	
8.16.2.34 J OUTDOOR PLAY	Services & Care of Childre	n		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	roou Service		T	Compliance
8.16.2.35 C MENUS				Compliance
8.16.2.35 D KITCHENS				Compliance
8.16.2.35 E MEAL TIMES				Compliance
0.10.2.00 E MEAE 11ME0	Haalib O Cafata Damainaman	4-		Соттриалос
8.16.2.36 A HYGIENE	Health & Safety Requiremen	ts		Compliance
8.16.2.36 B FIRST AID REQUIREMENTS				Compliance
8.16.2.36 C MEDICATION				Compliance
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES 8.16.2.37 A-G TRANSPORTATION REQUIREMENTS F				Compliance Non-compliance
A vehicle used for transporting children is not e missing themometer, soap, scissors, tape. Corrective Action Plan  The vehicle will be equipped with required item Date to be Completed: 02/13/2018  Deficiencies  A vehicle used for transporting children is not e Regulation: 8.16.2.37 A  Corrective Action Plan  The vehicle will be equipped with required item Date to be Completed: 03/13/2018	rected on site.  s. Corrected on site.  quipped with water.	KIL WAS		
	Buildings, Grounds & Safet	у		
8.16.2.38 A HOUSEKEEPING				Compliance
8.16.2.38 B PEST CONTROL				Compliance
8.16.2.38 C MECHANICAL SYSTEMS				Compliance
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND EL	ECTRICAL			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				Non-compliance
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Survey Report Form Page 3 of 4

Center Name:	License Number:	Date:
LouAnn Murray	55521	02/13/2018

## **Buildings, Grounds & Safety**

### **Deficiencies**

The home's fire extinguisher does not have a tag with a date verifying yearly inspection. Car used for transports did not have serve tag or receipt of purchase.

**Regulation:** 8.16.2.38G(2)

# **Corrective Action Plan**

The fire extinguisher will be inspected and have an official tag noting the date of inspection .

Date to be Completed: 03/13/2018

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.

7/wK/15

Surveyor:Kia Kennedy

Facility Rep:LouAnn Murray

02/13/2018 02/13/2018

Date

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Date