

Center Name: Lupe Barragan		Address: 908 Bard St. Silver City, NM 88061			Phone: (575)534-4154		
License Number: 15013	Issue Date: 04/25/2017	Expiration Date: 04/24/2018	Type: 2 Star Group Child Care Home		Status: Licensed		
Capacity					Census		
Over Age 2:	8	Under Age 2:	4	Night Care:	0	Playground:	0
						Over 2:	1
						Under 2:	2
Days and Hours of Operation							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed
Closing Times:	05:00 PM	05:00 PM	05:00 PM	05:00 PM	05:00 PM		
# of Classrooms: 2	Purpose: Semi-Annual			Date: 08/25/2017		Time: 11:30 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	N/A
Administrative Requirements	
8.16.2.32 A ADMINISTRATIVE RECORDS	Compliance
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 <u>Deficiencies</u> Of the 3 children's records reviewed, 3 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) <u>Corrective Action Plan</u> The home will review a child's record to ensure complete information has been obtained before a child is admitted. Date to be Completed: 09/25/2017	Non-compliance

Center Name: Lupe Barragan	License Number: 15013	Date: 08/25/2017
Administrative Requirements		
<p>Deficiencies Of the 3 children's records reviewed, 3 does/do not have any personal or emergency information on file. See the Children's Records 8.16.2.32 form for the name of any child needing a complete record. Regulation: 8.16.2.32D(1)(2)</p> <p>Corrective Action Plan The home will review enrollment procedures to ensure complete personal and emergency information is on file before a child is admitted. Date to be Completed: 09/25/2017</p>		
<p>8.16.2.32 E PERSONNEL RECORDS</p> <p>Deficiencies The home does not have documentation of a background check for person(s) over 18 years of age and older living in the home. Regulation: 8.16.2.32E(1)</p> <p>Corrective Action Plan Documentation of a background check and employment history verification for all staff members and all adults living in the home. A background check must be conducted at least once every five years on all required individuals. Date to be Completed: 09/01/2017</p>	Non-compliance	
8.16.2.32 F PERSONNEL HANDBOOK	N/A	
Personnel & Staffing		
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance	
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	N/A	
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	Compliance	
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	
8.16.2.34 J OUTDOOR PLAY	Compliance	
8.16.2.34 K SWIMMING, WADING AND WATER	N/A	
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	Compliance	

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Food Service		
8.16.2.35 D KITCHENS		Compliance
8.16.2.35 E MEAL TIMES		Not Inspected
Health & Safety Requirements		
8.16.2.36 A HYGIENE		Compliance
8.16.2.36 B FIRST AID REQUIREMENTS		Not Inspected
8.16.2.36 C MEDICATION		N/A
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES		Compliance
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES		Not Inspected
Buildings, Grounds & Safety		
8.16.2.38 A HOUSEKEEPING		Compliance
8.16.2.38 B PEST CONTROL		N/A
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 Deficiencies The home failed to conduct a fire drill for the month(s) of June; July. Regulation: 8.16.2.38G(3) Corrective Action Plan A monthly fire drill will be held and recorded. Date to be Completed: 09/25/2017		Non-compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.38 I 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.

 12.40	08/25/2017		08/25/2017
Surveyor: Emma Gonzales	Date	Facility Rep: Lupe Barragan	Date