

Lune Barragan			Address: 908 Bard St.						Phone:		
Lupe Barragan			Silver City, NM 88061					(575)534-4154			
License Number: Issue	Date:	Expiration Dat	te:	Туре:			Status:				
15013 04/25/2017 04/24/2018		04/24/2018	2 Star Group Child Care Home Licensed								
Capacity			-			Cer	nsus				
Over Age 2: 8 Unde	er Age 2: 4	Night Car	re:	0 Pla	ayground: 0	Ove	er 2:	4	Unde	er 2: 1	
Days and Hours of Operation	on										
	<u>Monday</u>	<u>Tuesday</u>	We	<u>ednesday</u>	<u>Thursday</u>	Fri	<u>day</u>	<u>S</u>	Saturday	<u>Sunday</u>	
Opening Times:	07:	07:		07:	07:	0	7:		Closed	Closed	
Closing Times:	05:00 PM	05:00 PM	05	5:00 PM	05:00 PM	05:0	0 PM				
# of Classrooms:	Purp	ose:			Date:			Tim	ie:		
2	Other	r			09/21/2017			11:1	0 AM		
Comments											
This visit is to monitor condi	itions of operat	tion. All conditi	ions are b	eing met.							

This visit is to monitor conditions of operation. All conditions are being met.	
A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTE	D 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	N/A
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	N/A
8.16.2.32 C PARENT HANDBOOK	N/A
8.16.2.32 D CHILDREN'S RECORDS	N/A
8.16.2.32 E PERSONNEL RECORDS	N/A
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	N/A
8.16.2.34 B NAPS OR REST PERIOD	N/A
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	N/A
8.16.2.34 D DIAPERING AND TOILETING	N/A
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	N/A
8.16.2.34 F NIGHT CARE	N/A
8.16.2.34 G PHYSICAL ENVIRONMENT	N/A

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Center Name:	License Number:	Date:	
Lupe Barragan	15013	09/21/2017	
Services & 0	Care of Children		
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT			N/A
8.16.2.34 I EQUIPMENT AND PROGRAM			N/A
8.16.2.34 J OUTDOOR PLAY			N/A
8.16.2.34 K SWIMMING, WADING AND WATER			N/A
8.16.2.34 L FIELD TRIPS			N/A
Food	d Service	<u> </u>	
8.16.2.35 B MEALS AND SNACKS			N/A
8.16.2.35 C MENUS			N/A
8.16.2.35 D KITCHENS			N/A
8.16.2.35 E MEAL TIMES			N/A
Health & Safe	ety Requirements	<u> </u>	
8.16.2.36 A HYGIENE	oty requirements		N/A
8.16.2.36 B FIRST AID REQUIREMENTS			N/A
8.16.2.36 C MEDICATION			N/A
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES			N/A
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES		N/A	
	Prounds 9 Cafatra		
8.16.2.38 A HOUSEKEEPING	Grounds & Safety		N/A
8.16.2.38 B PEST CONTROL			N/A
8.16.2.38 C MECHANICAL SYSTEMS			N/A
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL			N/A
8.16.2.38 E EXITS			N/A
8.16.2.38 F TOILET AND BATHING FACILITIES			N/A
8.16.2.38 G SAFETY COMPLIANCE			N/A
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL	. DRUGS AND CONTROLLED SUBS	TANCES Com	pliance
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.

09/21/2017

09/21/2017

Surveyor:Steven Wells

Date

Facility Rep:Lupe Barragan

Date