



### Facility

Name: *Maria Limas* License Number: *74943*  
 Address: *109 Linda Vista, Sunland Park, NM 88063*  
 Phone: *9154965932* Fax: E-mail: *none*

### License Information

Type: *2 Star Group Child Care Home* Status: *Licensed* Issue Date: *01/13/2018* Expiration Date: *01/12/2019*

### Capacity

Over Age 2: *8* Under Age 2: *4* Night Care: *0* Playground: *0*  
 Square Footage: *0*

### Census

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

### Classrooms

Number of Classrooms: *1*

### Days and Hours of Operation

<b>Monday</b> <i>7:00 AM - 6:00 PM</i>	<b>Tuesday</b> <i>7:00 AM - 6:00 PM</i>	<b>Wednesday</b> <i>7:00 AM - 6:00 PM</i>	<b>Thursday</b> <i>7:00 AM - 6:00 PM</i>	<b>Friday</b> <i>7:00 AM - 6:00 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

### Inspection

Date: *01/15/2019* Time In: *1:55 PM* Time Out: *2:46 PM* Purpose: *Follow-up*

### Licensure

- 8.16.2.31 A Licensing Requirements N/A
- 8.16.2.31 B Capacity of a Home N/A
- 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

### Administrative Requirements (*continued*)

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	N/A
8.16.2.33 B Staff Qualifications and Training	Compliance

### 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
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, Wadding and Water	N/A
8.16.2.34 L Field Trips	N/A

### Food Service

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 & Safety Requirements

8.16.2.36 A Hygiene	N/A
8.16.2.36 B First Aid Requirements	N/A
8.16.2.36 C Medication	N/A

**Health & Safety Requirements (*continued*)**

8.16.2.36 D Illness and Notifiable Diseases	N/A
8.16.2.37 A-G Transportation Requirements for Homes	N/A

**Buildings, Grounds & Safety**

8.16.2.38 A Housekeeping	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 Substances	N/A
8.16.2.38 I Pets	N/A

**Additional Comments**

*This is a follow up to Inspection conducted on 01/10/2019.*

*The provider and secondary provider have completed the required 3 hour training for Health and Safety.*

**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.



Surveyor: Jose Morales



Facility Representative: Maria Limas