



Facility

Name: *Maria Teresa Navarro-Peyton* **License Number:** *14199*
Address: *2702 Crestview, Las Cruces, NM 88011*
Phone: *5756408465* **Fax:** **E-mail:** *mtnpeyton@hotmail.com*

License Information

Type: *2 Star Family Child Care Home* **Status:** *Licensed* **Issue Date:** *10/14/2017* **Expiration Date:** *10/13/2018*

Capacity

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

Census

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

Classrooms

Number of Classrooms: *1*

Days and Hours of Operation

Monday <i>6:00 PM - 11:00 PM</i>	Tuesday <i>6:00 PM - 11:00 PM</i>	Wednesday <i>6:00 PM - 11:00 PM</i>	Thursday <i>6:00 PM - 11:00 PM</i>	Friday <i>6:00 PM - 11:00 PM</i>
Saturday <i>8:00 AM - 11:00 PM</i>	Sunday <i>8:00 AM - 11:00 PM</i>			

Inspection

Date: *09/16/2018* **Time In:** *1:37 PM* **Time Out:** *2:52 PM* **Purpose:** *Annual*

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 *Compliance*

Administrative Requirements

- 8.16.2.32 A Administrative Records *Compliance*
- 8.16.2.32 B Mission, Philosophy and Curriculum Statement *Compliance*
- 8.16.2.32 C Parent Handbook *Compliance*

Administrative Requirements (continued)

8.16.2.32 D Children's Records

Compliance

8.16.2.32 E Personnel Records

Non-compliance

The home does not have documentation of a person(s) over 18 years of age and older living in the home for background check within 5 years. Background expired on 9/13/18 for household member and will expire on 9/25/18 for provider.

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.

***Provider does not currently care for children during the week, fingerprints and application will be submitted by 9/21/18. (will not care for children until fingerprints are submitted)*

Regulation: 8.16.2.32.E.1.

Date to be Completed: 09/21/2018

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

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

Compliance

8.16.2.34 D Diapering and Toileting

Compliance

8.16.2.34 E Additional Requirements for Children with Special Needs

Not Inspected

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

Services & Care of Children (continued)

8.16.2.34 J Outdoor Play

Non-compliance

The fall zone underneath the swings, slide, climber is not adequate as evidenced by the resilient material is not deep enough. Sand has become packed and hard, needs tilling.

Corrective Action Plan

A resilient surface will be provided beneath the play equipment and a schedule will be devised to provide routine checks.

Regulation: 8.16.2.34.J.3.

Date to be Completed: 10/16/2018

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

Compliance

8.16.2.35 C Menus

Compliance

8.16.2.35 D Kitchens

Compliance

8.16.2.35 E Meal Times

Compliance

Health & Safety Requirements

8.16.2.36 A Hygiene

Compliance

8.16.2.36 B First Aid Requirements

Compliance

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

N/A

Buildings, Grounds & Safety

8.16.2.38 A Housekeeping

Non-compliance

The playground area has a heavy accumulation of pine needles, bird droppings on equipment, and cobwebs.

Corrective Action Plan

A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards.

Regulation: 8.16.2.38.A.1.

Date to be Completed: 10/16/2018

8.16.2.38 B Pest Control

Compliance

Buildings, Grounds & Safety (continued)

- 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 **Non-compliance**

The list of emergency telephone numbers was not posted next to the phone.

Corrective Action Plan
A complete list of emergency phone numbers will be posted next to the phone.

Regulation: 8.16.2.38.G.4. Date to be Completed: 10/16/2018

The home's fire extinguisher does not have a tag with a date verifying yearly inspection.

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

Regulation: 8.16.2.38.G.2. Date to be Completed: 10/16/2018

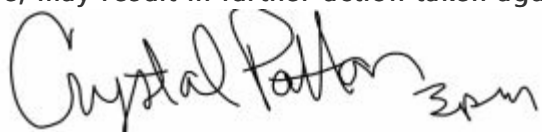
- 8.16.2.38 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances Compliance
- 8.16.2.38 I Pets Compliance

Additional Comments

Emergency preparedness regulations were discussed with the provider.
Provider requested that we send current regulations and notifiable diseases.

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: Crystal Patton


 Facility Representative: Maria Peyton