

Center Name: Maria Ponce		Address: 337 Ace Ryan Chaparral, NM 88081			Phone: (915)820-2056			
License Number: 117336	Issue Date: 11/1/2016	Expiration Date: 08/28/2017	Type: 4 Star FOCUS Family Child Care Home		Status: Licensed			
Capacity					Census			
Over Age 2:	8	Under Age 2:	4	Night Care:	0	Playground:	0	
					Over 2:	8	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:	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	Closed	
Closing Times:	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM		
# of Classrooms: 1		Purpose: Semi-Annual		Date: 01/06/2017		Time: 01:20 PM		
Comments New regulations were discussed with 2nd Educator.								

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

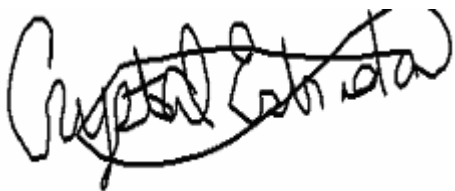
Licensure	
8.16.2.31 A LICENSING REQUIREMENTS	Compliance
8.16.2.31 B CAPACITY OF A HOME	Compliance
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Compliance
Administrative Requirements	
8.16.2.32 A ADMINISTRATIVE RECORDS	Compliance
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.32 C PARENT HANDBOOK	Not Inspected
8.16.2.32 D CHILDREN'S RECORDS <u>Deficiencies</u> There was no record of each child's arrival and departure time and dates of attendance initialed by a parent, guardian, or person authorized to pick up the child. Of 10 children present 5 were signed in. See Children's Records 8.16.2.32 form for the child(ren) with missing information. Regulation: 8.16.2.32D(1)(i) <u>Corrective Action Plan</u> The home will maintain a record of the time any child arrived and left the home and dates of attendance initialed by a parent, guardian, or person authorized to pick up the child. Date to be Completed: 02/06/2017	Non-compliance
8.16.2.32 E PERSONNEL RECORDS	Non-compliance

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Administrative Requirements		
<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: 02/06/2017</p>		
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		Compliance
<p>8.16.2.34 D DIAPERING AND TOILETING</p> <p>Deficiencies A staff member did not wear non-porous, single-use gloves when changing a diaper. Staff states that they are currently out of gloves. Regulation: 8.16.2.34D(2)</p> <p>Corrective Action Plan Diaper changing requirements will be reviewed to ensure diapering is sanitary. Date to be Completed: 02/06/2017</p> <p>Deficiencies Diapers and diapering supplies are not labeled. Regulation: 8.16.2.34D(3)</p> <p>Corrective Action Plan Staff will ensure diapers and diapering supplies are labeled and properly stored. Date to be Completed: 02/06/2017</p> <p>Deficiencies The diaper changing surface is unclean. There is no designated mat to utilize when changing diapers on a waterproof surface, multiple napping mats are used. Regulation: 8.16.2.34D(4)</p> <p>Corrective Action Plan Cleaning and disinfecting procedures will be completed. A specific mat will be designated and solely utilized as a diaper changing surface. Date to be Completed: 02/06/2017</p>		Non-compliance
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS		Not Inspected
8.16.2.34 F NIGHT CARE		N/A

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Services & Care of Children		
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 Deficiencies The fall zone underneath the climber is not adequate as evidenced by the resilient material is not deep enough. Regulation: 8.16.2.34J(3) Corrective Action Plan A resilient surface will be provided beneath the play equipment and a schedule will be devised to provide routine checks. Date to be Completed: 02/06/2017		Non-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 Deficiencies Weekly menus are not posted at least one week in advance. Regulation: 8.16.2.35C(1) Corrective Action Plan A dated weekly menu will be posted in an area visible to parents. Menus shall be posted at least one week in advance, in a conspicuous place, for review by parents, educators and children. Date to be Completed: 02/06/2017		Non-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		Not Inspected
8.16.2.36 C MEDICATION		Not Inspected
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		Compliance
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

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Buildings, Grounds & Safety		
8.16.2.38 F TOILET AND BATHING FACILITIES		Compliance
8.16.2.38 G SAFETY COMPLIANCE <u>Deficiencies</u> The home's fire extinguisher does not have a tag with a date verifying yearly inspection. Expired. Regulation: 8.16.2.38G(2) <u>Corrective Action Plan</u> The fire extinguisher will be inspected and have an official tag noting the date of inspection . Date to be Completed: 02/06/2017		Non-compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.38 I PETS <u>Deficiencies</u> The home does not have a record of inoculations for a pet dog in the home. Regulation: 8.16.2.38I(2) <u>Corrective Action Plan</u> An inoculation record will be obtained and kept on file for future review. Date to be Completed: 02/06/2017		Non-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.



01/06/2017

Signature
on File

01/06/2017

Surveyor:Crystal Estrada	Date	Facility Rep: Maria Ponce	Date
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