

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:			Address:				Phone	Phone:	
Marlene Ortiz			3563 Placita Santa Fe, N	a Real Loop IM 87507				(505)31	6-6251
License Number:	Issue Date:	Expiration I	Date:	Туре:			Status:	-	
151398	03/15/2016	03/14/2017		2 Star Famil	ly Child Care Home		Licensed		
Capacity						Cen	isus		
Over Age 2: 4	Under Age 2:	2 Night	Care:	0 Pla	ayground: 0	Ove	r 2:	2	Under 2: 1
Days and Hours of	Operation								
Opening Times	<u>Monday</u>	Tuesda	<u>y</u> <u>W</u>	<u>ednesday</u>	<u>Thursday</u>	<u>Fric</u>	day	<u>Saturday</u> Closed	<u>Sunday</u> Closed
Opening Times: Closing Times								Closed	Closed
# of Classrooms:		urpose:			Date:			Time:	
1		nnual			01/09/2017			01:05 PM	
Comments Went over new Regs	s effective 10/01/20	)16, also provic	led a copy c	f new Regs.					
A \$110					D OF NON-COMPLIANCE O	E TUE			
A 30K		TT HAS BEEN MA	DE AND TOO		D OF NON-COMPLIANCE O		REGULARIC		BELOW.
				Licen	sure				1
8.16.2.31 A LICENS	SING REQUIREME	NTS							Compliance
8.16.2.31 B CAPAC	ITY OF A HOME								Compliance
8.16.2.31 C INCIDE	NT REPORTING R	EQUIREMENTS	S						Compliance
			Admi	nistrative	Requirements				
8.16.2.32 A ADMINISTRATIVE RECORDS					Compliance				
8.16.2.32 B MISSIO	N, PHILOSOPHY A	AND CURRICUL		MENT					Compliance
8.16.2.32 C PAREN	T HANDBOOK								Compliance
8.16.2.32 D CHILDR	EN'S RECORDS								Compliance
8.16.2.32 E PERSO	NNEL RECORDS								Non-compliance
Deficiencies									
The home does not have documentation of a background check within 5 years for care									
giver(s). Regulation: 8.16.2.32E(1)									
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: 01/20/2017									
8.16.2.32 F PERSO		(							Compliance
Personnel & Staffing									
8.16.2.33 A PERSO	NNEL AND STAFF	ING REQUIRE	MENTS						Compliance
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING					Non-compliance				

Center Name:	License Number:	Date:		
Marlene Ortiz	151398	01/09/2017		
Personnel &	Staffing			
<u>Deficiencies</u> Educators did not complete the following training within 3-months: He Regulation: 8.16.2.33B(1) <u>Corrective Action Plan</u>	alth and safety class.			
All educators, regardless of the number of hours per week, will complete training. Date to be Completed: 02/09/2017	ete the above listed			
Services & Care	e of Children			
8.16.2.34 A GUIDANCE		C	Compliance	
8.16.2.34 B NAPS OR REST PERIOD		C	Compliance	
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		C	Compliance	
8.16.2.34 D DIAPERING AND TOILETING		C	Compliance	
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL N	EEDS	C	Compliance	
8.16.2.34 F NIGHT CARE		С	Compliance	
8.16.2.34 G PHYSICAL ENVIRONMENT		С	Compliance	
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT		C	Compliance	
8.16.2.34 I EQUIPMENT AND PROGRAM		C	Compliance	
8.16.2.34 J OUTDOOR PLAY		C	Compliance	
8.16.2.34 K SWIMMING, WADING AND WATER		C	Compliance	
8.16.2.34 L FIELD TRIPS		C	Compliance	
Food Se	rvice			
8.16.2.35 B MEALS AND SNACKS		C	Compliance	
8.16.2.35 C MENUS		C	Compliance	
8.16.2.35 D KITCHENS		Non-o	compliance	
Deficiencies				
The home's refrigerator does not have a working internal thermomete Regulation: 8.16.2.35D(7)	r.			
Corrective Action Plan				
A working internal thermometer will be obtained.				
Date to be Completed: 02/09/2017				
8.16.2.35 E MEAL TIMES		c	Compliance	
Health & Safety Requirements				
8.16.2.36 A HYGIENE		C	Compliance	
8.16.2.36 B FIRST AID REQUIREMENTS		C	Compliance	
8.16.2.36 C MEDICATION	C	Compliance		
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES	C	Compliance		
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES		C	Compliance	

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Buildings, Grou	nds & Safety		
8.16.2.38 A HOUSEKEEPING Deficiencies			Non-compliance
The home has a heavy accumulation of toys			
Regulation: 8.16.2.38A(1)			
Corrective Action Plan A routine will be established to assess all areas of the premises for cle potential hazards. Date to be Completed: 02/09/2017	eanliness , safety and		
Deficiencies The lighter fluid in the back yard are not safe in that it be easily acces Regulation: 8.16.2.38A(1)	sed by children.		
Corrective Action Plan The safety violation will be corrected and a system for routine safety i Date to be Completed: 02/09/2017	nspection developed.		
8.16.2.38 B PEST CONTROL			Compliance
8.16.2.38 C MECHANICAL SYSTEMS			Non-compliance
<u>Deficiencies</u> Water coming from a faucet was not below 110 degrees (Fahrenheit). Regulation: 8.16.2.38C(5)			
<u>Corrective Action Plan</u> The home will ensure water coming from faucets is below 110 degree installing a tempering valve ahead of all domestic water-heater piping Date to be Completed: 02/09/2017			
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 Deficiencies The toilet room used by children in care does not have disposable tov accessible to children. Regulation: 8.16.2.38F(1)	vels at a height		Non-compliance
Corrective Action Plan Supplies/dispensers will be relocated so they are accessible to childre Date to be Completed: 02/09/2017	en.		
8.16.2.38 G SAFETY COMPLIANCE			Compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRU	IGS AND CONTROLLED SUBSTAN	ICES	Compliance
<ul> <li>8.16.2.38 I PETS</li> <li><u>Deficiencies</u></li> <li>The home does not have a record of inoculations for a pet dog; cat in Regulation: 8.16.2.38I(2)</li> </ul>	the home.		Non-compliance
Corrective Action Plan An inoculation record will be obtained and kept on file for future review Date to be Completed: 02/09/2017	ν.		

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Please note: Per CYFD regulation NMAC 8.16.2 above, may result in further action taken agains	-	ply with the corrective action plans as noted	
Ad-child Douth	01/09/2017	Abodene Orbo	01/09/2017
Surveyor:Franchesca Archuleta	Date	Facility Rep:Marlene Ortiz	Date
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Survey Report Form