



### Facility

**Name:** *Martha Munoz* **License Number:** *49231*  
**Address:** *343 Morrison Lane, Sunland Park, NM 88063*  
**Phone:** *9154743370* **Fax:**  **E-mail:** *mmmaestra1994@gmail.com*

### License Information

**Type:** *5 Star FOCUS Group Child Care Home* **Status:** *Licensed* **Issue Date:** *05/01/2018* **Expiration Date:** *04/30/2019*

### Capacity

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

### Census

**Over 2:** *7* **Under 2:** *0*

### Classrooms

**Number of Classrooms:** *2*

### Days and Hours of Operation

<b>Monday</b> <i>7:30 AM - 2:30 PM</i>	<b>Tuesday</b> <i>7:30 AM - 2:30 PM</i>	<b>Wednesday</b> <i>7:30 AM - 2:30 PM</i>	<b>Thursday</b> <i>7:30 AM - 2:30 PM</i>	<b>Friday</b> <i>7:30 AM - 2:30 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

### Inspection

**Date:** *02/04/2019* **Time In:** *1:26 PM* **Time Out:** *2:21 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*
- 8.16.2.32 D Children's Records *Compliance*

### Administrative Requirements (*continued*)

8.16.2.32 E Personnel Records	<i>Compliance</i>
8.16.2.32 F Personnel Handbook	<i>Compliance</i>

### Personnel & Staffing

8.16.2.33 A Personnel and Staffing Requirements	<i>Compliance</i>
8.16.2.33 B Staff Qualifications and Training	<i>Compliance</i>

### Services & Care of Children

8.16.2.34 A Guidance	<i>Compliance</i>
8.16.2.34 B Naps or Rest Period	<i>Compliance</i>
8.16.2.34 C Additional Requirements for Infants and Toddlers	<i>N/A</i>
8.16.2.34 D Diapering and Toileting	<i>N/A</i>
8.16.2.34 E Additional Requirements for Children with Special Needs	<i>N/A</i>
8.16.2.34 F Night Care	<i>N/A</i>
8.16.2.34 G Physical Environment	<i>Compliance</i>
8.16.2.34 H Social-Emotional Responsive Environment	<i>Compliance</i>
8.16.2.34 I Equipment and Program	<i>Compliance</i>
8.16.2.34 J Outdoor Play	<i>Compliance</i>
8.16.2.34 K Swimming, Wadding and Water	<i>Compliance</i>
8.16.2.34 L Field Trips	<i>Compliance</i>

### Food Service

8.16.2.35 B Meals and Snacks	<i>Compliance</i>
8.16.2.35 C Menus	<i>Compliance</i>
8.16.2.35 D Kitchens	<i>Compliance</i>
8.16.2.35 E Meal Times	<i>Compliance</i>

### Health & Safety Requirements

8.16.2.36 A Hygiene	<i>Compliance</i>
8.16.2.36 B First Aid Requirements	<i>Compliance</i>
8.16.2.36 C Medication	<i>N/A</i>

**Health & Safety Requirements (continued)**

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

**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
8.16.2.38 F Toilet and Bathing Facilities:	Compliance
8.16.2.38 G Safety Compliance	Compliance
8.16.2.38 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances	Compliance
8.16.2.38 I Pets	N/A

**Additional Comments**

*Annual Inspection*

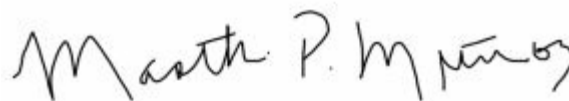
*Fire Drill conducted during the inspection..*

**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: *Martha Munoz*