Facility

Name: Melissa George License Number: 166657

Address: 120 Raven Dr., Clovis, NM 88101

Phone: 5757912940 Fax: E-mail:

License Information

Type: 2 Star + Group Child Status: Licensed Issue Date: 04/04/2018 Expiration Date:

Care Home 04/03/2019

Capacity

Over Age 2: 4 Under Age 2: 2 Night Care: 0 Playground: 0

Square Footage: 315

Census

Over 2: 7 Under 2: 1

Classrooms

Number of Classrooms: 1

Days and Hours of Operation

Monday Tuesday Wednesday Thursday Friday

Saturday Sunday 7:00 AM - 6:00 PM Closed

Inspection

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

08/09/2018 https://cyfd.org/ 1 of 4

Melissa George 166657

Administrative Requirements (continued)

8.16.2.32 D Children's Records

Non-compliance

Of the 8 children's records reviewed, 1 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.32 form for the child(ren) with no immunization/exemption.

Corrective Action Plan

The home will review a child's record to ensure complete information has been obtained before a child is admitted.

Regulation: 8.16.2.32.D.1.e.

Date to be Completed: 09/08/2018

8.16.2.32 E Personnel Records

Compliance

8.16.2.32 F Personnel Handbook

Not Inspected

Personnel & Staffing

8.16.2.33 A Personnel and Staffing Requirements

Non-compliance

The group day care home is licensed to provide care for nine children and is required to have at least two care givers at the home at all times when more than six children are present or when more than two children under the age of two are present. Eight children were present including 1 children under the age of two years old and only one care giver was present.

Corrective Action Plan

At least two care givers will be present when more than six children are present or when more than two children under the age of two are present.

Regulation: 8.16.2.33.A.7.

Date to be Completed: 08/09/2018

8.16.2.33 B Staff Qualifications and Training

Non-compliance

The home did not supply proof that any of the three caregivers were currently certified in First Aid/ CPR.

Corrective Action Plan

A home must have all educators certified in first aid and cardio-pulmonary resuscitation (CPR).

Regulation: 8.16.2.33.B.6. Date to be Completed: 09/08/2018

Services & Care of Children

8.16.2.34 A Guidance Compliance

8.16.2.34 B Naps or Rest Period Compliance

Melissa George 166657

Services & Care of Children (continued)

8.16.2.34 C Additional Requirements for Infants and Toddlers

8.16.2.34 D Diapering and Toileting

8.16.2.34 E Additional Requirements for Children with Special Needs

Compliance

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 | Equipment and Program Compliance

8.16.2.34 J Outdoor Play Compliance

8.16.2.34 K Swimming, Wadding and Water N/A

8.16.2.34 L Field Trips Compliance

Food Service

8.16.2.35 B Meals and Snacks Compliance

8.16.2.35 C Menus Compliance

8.16.2.35 D Kitchens Non-compliance

A food is not properly stored; the item is not labeled and dated.

Corrective Action Plan

Proper food storage practices will be implemented. Provider corrected onsite.

Regulation: 8.16.2.35.D.4. Date to be Completed: 08/09/2018

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 Compliance

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

Melissa George 166657

Buildings, Grounds & Safety (continued)

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

Non-compliance

The home failed to conduct a fire drill for the month(s) of April, June, May, July.

Corrective Action Plan

Regulation: 8.16.2.38.G.3.

A monthly fire drill will be held and recorded.

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: 09/08/2018

Date to be Completed: 08/09/2018

8.16.2.38 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

Compliance

8.16.2.38 I Pets Compliance

Additional Comments

Gave Provider technical assistance on Emergency Preparedness Drills. Provider must perform the Emergency Preparedness drills starting the 3rd quarter 2018.

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: Nicholas Conde

Facility Representative: Melissa George