

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:				ress:	EY KEPUI					Phone	:	
Melissa George				120 Raven Dr. Clovis, NM 88101 (57				575)791-2940				
License Number:	Issue Date:	Expir	ration Date:	5, INIVI C	Type:			Status:				
166657	01/1/2018	04/3/2				roup Child Care Home		Licensed				
Capacity							Ce	nsus				
Over Age 2: 4	Under Age 2:	2	Night Care:		0 F	layground: 0		er 2:	2		Under 2:	1
Days and Hours of	Operation											
	Monday	<u>'</u> <u>1</u>	<u>Fuesday</u>		ednesday	Thursday		iday 7.00		<u>turday</u>		<u>Sunday</u>
Opening Times Closing Times			07:00 08:00 P		07:00 08:00 P	07:00 08:00 P		7:00 :00 P	U	losed		Closed
# of Classrooms:		Purpose:				Date:			Time			
2 Annual						01/23/2018			-	09:00 AM		
Comments												
Melissa was not ava	ailable she has ti	raveled to C	California to h	er mot	thers funer	al.						
A SUR	VEY OF YOUR FAC	ILITY HAS B	EEN MADE AND		ARE NOTIFIE	ED OF NON-COMPLIANO	CE OF TH	E REGULATI	ONS AS	NOTED	BELOW:	
					Lice	nsure						
8.16.2.31 A LICEN		MENTS										Compliance
8.16.2.31 B CAPAC	ITY OF A HOME											Compliance
8.16.2.31 C INCIDE	NT REPORTING	REQUIRE	MENTS									Not Inspected
			A	dmin	nistrative	e Requirements						
8.16.2.32 A ADMINI	STRATIVE REC	ORDS										Compliance
8.16.2.32 B MISSIO	N, PHILOSOPH	Y AND CUP	RRICULUM S	TATEN	IENT							Compliance
8.16.2.32 C PAREN	T HANDBOOK											Compliance
8.16.2.32 D CHILDF	REN'S RECORD	s									N	on-compliance
Deficiencies												
Of the children's records reviewed, 1 is/are missing complete parental/guardian information as follows: 1. See Children's Records 8.16.2.32 form for the child(ren) with missing												
as follows: 1. Se information.	ee Children's R	ecords 8.	16.2.32 form	n for th	ne child(re	en) with missing						
information.												
Regulation: 8.16	.2.32D(1)(b)											
Corrective Acti	on Plan											
The home will re	eview a child's	record to	ensure com	plete i	informatio	on has been obtain	ed					
before a child is	admitted.											
Date to be Com	oleted: 02/23/2018	1										

Contor Nama	Liconos Number	Data
Center Name: Melissa George	License Number: 166657	Date: 01/23/2018
Melissa George		01/23/2010
Administrative	Requirements	
Deficiencies Of the 9 children's records reviewed, 1 is/are missing a list of people the child and an authorization form signed by the parent or guardian 8.16.2.32 form for the child(ren) with missing information and/or auth Regulation: 8.16.2.32D(1)(c)	See Children's Records	
<u>Corrective Action Plan</u> The home will review a child's record to ensure complete information before a child is admitted. Date to be Completed: 02/23/2018	n has been obtained	
Deficiencies Of the 9 children's records reviewed, 9 is/are missing the date the cl home. See Children's Records 8.16.2.32 form for the child(ren) with and/or authorization. Regulation: 8.16.2.32D(1)(d)		
Corrective Action Plan The first attendance date will be added. Date to be Completed: 02/23/2018		
Deficiencies Of the 9 children's records reviewed, 1 is/are missing a copy of an u record or public health division approved exemption. See Children's for the child(ren) with no immunization/exemption. The Department of approved the Certificate of Exemption. Regulation: 8.16.2.32D(1)(e)	Records 8.16.2.32 form	
Corrective Action Plan The home will review a child's record to ensure complete information before a child is admitted.The home will ensure that the Certificate of approved. Date to be Completed: 02/23/2018		
Deficiencies Of the 9 children's records reviewed, 1 is/are missing written authori trip destination, date and time of field trip and expected return time, or guardian to remove the child from the premises to participate in o Children's Records 8.16.2.32 form for the child(ren) with missing info authorization.	from the child's parent ff-site activities. See	
Regulation: 8.16.2.32D(1)(g)		
<u>Corrective Action Plan</u> Written permission from the child's parent or guardian will be obtaine child off site. Date to be Completed: 02/23/2018	ed prior to taking the	

Center Name:	License Number:	Date:
Melissa George	166657	01/23/2018
Administrative Re	equirements	
Deficiencies Of the 9 children's records reviewed, 1 is/are missing a signed acknow	ledgement that the	
parent or guardian has read and understands the parent handbook. Se		
Records 8.16.2.32 form for the child(ren) with missing information.		
Regulation: 8.16.2.32D(1)(k)		
Corrective Action Plan		
The home will review a child's record to ensure complete information h	as been obtained	
before a child is admitted. Date to be Completed: 02/23/2018		
Deficiencies		
Of the 9 children's records reviewed, 1 is/are missing information on al	-	
conditions. See Children's Records 8.16.2.32form for the child(ren) wit	n missing information.	
Regulation: 8.16.2.32 D(2)(a)		
Corrective Action Plan		
The home will review a child's record to ensure complete information h	as been obtained	
before a child is admitted.		
Date to be Completed: 02/23/2018		
<u>Deficiencies</u>		
Of the 9 children's records reviewed, 1 is/are missing the name and tel		
people in the local area to contact in an emergency when a parent or g reached. See Children's Records 8.16.2.32form for the child(ren) with		
Regulation: 8.16.2.32D(2)(b)	missing information.	
Corrective Action Plan	as been obtained	
The home will review a child's record to ensure complete information h before a child is admitted.		
Date to be Completed: 02/23/2018		
•		
Deficiencies Of the 9 children's records reviewed, 1 is/are missing the name and tel	enhone number of a	
physician or emergency medical center authorized by a parent or guar	•	
case of illness or emergency. See Children's Records 8.16.2.32 form for		
missing information.		
Regulation: 8.16.2.32D(2)(c)		
Corrective Action Plan		
The home will review a child's record to ensure complete information h	as been obtained	
before a child is admitted.		
Date to be Completed: 02/23/2018		

Center Name:	License Number:	Date:			
Melissa George	166657	01/23/2018			
Administrative R	equirements				
Deficiencies Of the 9 children's records reviewed, 1 is/are missing a document givir permission to transport the child in a medical emergency and authoriza treatment signed by a parent or guardian. See Children's Records 8.16 child(ren) with missing information. Regulation: 8.16.2.32D(2)(d) Corrective Action Plan The home will review a child's record to ensure complete information here a child is admitted. Date to be Completed: 02/23/2018	ation for medical 5.2.32 form for the				
8.16.2.32 E PERSONNEL RECORDS			Compliance		
8.16.2.32 F PERSONNEL HANDBOOK			Compliance		
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			Not Inspected		
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS			Compliance		
8.16.2.34 D DIAPERING AND TOILETING			Non-compliance		
Deficiencies A staff member did not wear non-porous, single-use gloves when char their hands after changing a diaper. Regulation: 8.16.2.34D(2)	nging a diaper; wash				
Corrective Action Plan Diaper changing requirements will be reviewed to ensure diapering is s Date to be Completed: 02/23/2018	sanitary.				
Deficiencies The diaper changing surface is not disinfected after use. Regulation: 8.16.2.34D(4)					
Corrective Action Plan Cleaning and disinfecting procedures will be completed. Date to be Completed: 02/23/2018					
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NE	EDS		Not Inspected		
8.16.2.34 F NIGHT CARE			Not Inspected		
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			Compliance		
8.16.2.34 K SWIMMING, WADING AND WATER			Not Inspected		
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Center Name:	License Number:	Date:	
Melissa George	166657	01/23/2018	
Services	s & Care of Children		
8.16.2.34 L FIELD TRIPS			Not Inspecte
F	Food Service		
8.16.2.35 B MEALS AND SNACKS			Compliand
8.16.2.35 C MENUS			Compliand
8.16.2.35 D KITCHENS			Compliand
8.16.2.35 E MEAL TIMES			Compliand
Health &	Safety Requirements		
8.16.2.36 A HYGIENE			Complianc
8.16.2.36 B FIRST AID REQUIREMENTS			Complianc
8.16.2.36 C MEDICATION			Not Inspecte
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES			Not Inspecte
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES			N
Building	s, Grounds & Safety		
8.16.2.38 A HOUSEKEEPING	•		Compliand
8.16.2.38 B PEST CONTROL			Not Inspecte
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			Complianc
8.16.2.38 G SAFETY COMPLIANCE			Compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLE	GAL DRUGS AND CONTROLLED SUB	STANCES	Compliand
8.16.2.38 PETS			N/

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01/23/2018

Date

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Facility Rep:Melissa George

01/23/2018

Surveyor:Susie Aragon

Survey Report Form

Date