

Facility				
Name: Noahs Ark Learning Center				ense Number: 12988
Address: 5605 Bataan I				
Phone: 5755240827	Fax: 575-373-9929	E-mail: candy	@lascrucesfirst.org	9
License Information				
Type : 2 Star Child Care Center	Status: Licensed	Issue Date: 05	•	piration Date: /26/2019
Capacity				
Over Age 2: 165 Square Footage: 0	Under Age 2:0	Night Care: 0	Pla	yground: 77
Census				
Over 2:61	Under 2:0			
Classrooms				
Number of Classrooms	5:8			
Days and Hours of Opera	tion			
Monday 6:30 AM - 6:00 PM	Tuesday 6:30 AM - 6:00 PM	Wednesday 6:30 AM - 6:00 PM	Thursday 6:30 AM - 6:00 PM	Friday 1 6:30 AM - 6:00 PM
Saturday Closed	Sunday Closed			
Inspection				
Date: 09/06/2018	Time In: 12:50 PM	Time Out: 2:2.	5 PM Pui	rpose: Semi-Annual
Licensure				
8.16.2.11 A Types of Li	censes			N/A
8.16.2.11 B Renewal of License N/				
8.16.2.11 D Non-transferable Restrictions of License N/				
8.16.2.12 A, K, M Licensing Actions and Administrative Appeals N,				
8.16.2.17 E, F Surveys for Child Care Facilities Comp				
8.16.2.18 D Complaints				Compliance
8.16.2.21 A Licensing Requirements				Compliance
8.16.2.21 B Capacity of	Centers			Compliance

Licensure (continued)

8.16.2.21 C Incident Reporting Requirements	Compliance
Administrative Requirements	
8.16.2.22 A Administrative Records	Compliance
8.16.2.22 B Mission, Philosophy and Curriculum Statement	Not Inspected
8.16.2.22 C Policy and Procedures	Compliance
8.16.2.22 D Family Handbook	Not Inspected
8.16.2.22 E Children's Records	Compliance
8.16.2.22 F Personnel Records	Compliance
8.16.2.22 G Personnel Handbook	Not Inspected
Personnel & Staffing	
8.16.2.23 A Personnel and Staffing Requirements	Compliance
8.16.2.23 B Staff Qualifications and Training	Compliance
8.16.2.23 C Staff/Child Ratios and Group Sizes	Compliance
Services & Care of Children	
8.16.2.24 A Guidance	Compliance
8.16.2.24 B Naps or Rest Period	Compliance
8.16.2.24 C Additional Requirements for Infants and Toddlers	N/A
8.16.2.24 D Diapering and Toileting	Compliance
8.16.2.24 E Additional Requirements for Children with Special Needs	Compliance
8.16.2.24 F Additional Requirements for Night Care	N/A
8.16.2.24 G Physical Environment	Compliance
8.16.2.24 H Social-Emotional Responsive Environment	Compliance
8.16.2.24 I Equipment and Program	Compliance
8.16.2.24 J Outdoor Play Areas	Compliance
8.16.2.24 K Swimming, Wadding and Water	N/A
8.16.2.24 L Field Trips	Compliance

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Compliance

Food Service

8.16.2.25 B Meals and Snacks	Compliance
8.16.2.25 C Menus	Compliance
8.16.2.25 D Kitchens	Non-compliance
The freezer in the kitchen does not have a working internal thermometer	
Corrective action Plan The center will obtain and place a working thermometer in freezer.	
Regulation: 8.16.2.25.D.6.	Date to be Completed: 10/07/2018
8.16.2.25 E Meal Times	Compliance
Health & Safety Requirements	
8.16.2.26 A Hygiene	Compliance
8.16.2.26 B First Aid Requirements	Not Inspected
8.16.2.26 C Medication	Compliance
8.16.2.27 A-D Illness Requirements for Centers	N/A
8.16.2.28 A-H Transportation Requirements for Centers	Compliance
Buildings, Grounds & Safety	
8.16.2.29 A Housekeeping	Compliance
8.16.2.29 B Pest Control	N/A
8.16.2.29 C Mechanical Systems	Compliance
8.16.2.29 D Water and Waste	Compliance
8.16.2.29 E Lighting, Lighting Fixtures and Electrical	Compliance
8.16.2.29 F Exits and Windows	Compliance
8.16.2.29 G Toilet and Bathing Facilities	Compliance
8.16.2.29 H Safety Compliance	Compliance
8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Co	ontrolled Substances N/A
8.16.2.29 J Pets	N/A

Additional Comments

Equipment was inoperable at the time of survey. Provider was out briefed on deficiency. Provider was emailed the completed survey with Signature on File. Provider will sign Survey and return after review.

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.

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Surveyor: Sandra Connolly

Signature on file

Facility Representative: Marie Aguirre