

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Contor Nome:			1	VEY REPOR				Dham			
Center Name:				Address: 436 San Pablo SE					Phone:		
Oleidys Medina Perez				ue, NM 87108				(505)2	68-1884		
License Number:	Issue Date:	Expiration	Date:	Туре:			Status:				
138733	12/26/2016	12/25/2017		3 Star Grou	p Child Care Home		Licensed				
Capacity							nsus				
Over Age 2: 8	Under Age 2:	4 Nigh	Care:	0 Pla	ayground: 0	Ove	r 2:	8	Under 2:	2	
Days and Hours of	Operation										
Opening Times	Monday 12:00 AM	<u>Tuesda</u> 12:00 A		<u>Vednesday</u> 12:00 AM	<u>Thursday</u> 12:00 AM		<u>day</u> 0 AM	<u>Saturday</u> Closed	<u>/</u>	<u>Sunday</u> Closed	
Closing Times		12:00 A		12:00 AM	12:00 AM		0 AM	Closed		010304	
# of Classrooms:		Purpose:			Date:			Time:			
2	ļ	Annual			10/24/2017			09:15 AM			
Comments											
A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:											
				Licen	sure						
8.16.2.31 A LICENS		ENTS								Compliance	
8.16.2.31 B CAPAC	ITY OF A HOME									Compliance	
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS										Not Inspected	
			Admi	inistrative	Requirements						
8.16.2.32 A ADMINI	STRATIVE RECO	RDS								Compliance	
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT									Not Inspected		
8.16.2.32 C PARENT HANDBOOK									Compliance		
8.16.2.32 D CHILDR	REN'S RECORDS									Compliance	
8.16.2.32 E PERSONNEL RECORDS									Compliance		
8.16.2.32 F PERSONNEL HANDBOOK									Compliance		
			F	Personnel	& Staffing						
8.16.2.33 A PERSO	NNEL AND STAF	FING REQUIRE	MENTS							Compliance	
8.16.2.33 B STAFF	QUALIFICATION	S AND TRAININ	G							Compliance	
			Serv	/ices & Ca	re of Children						
8.16.2.34 A GUIDAN	ICE									Compliance	
8.16.2.34 B NAPS C	OR REST PERIOD)								Compliance	
8.16.2.34 C ADDITIO		IENTS FOR INF	ANTS AND	TODDLERS						Compliance	
8.16.2.34 D DIAPER		TING								Compliance	
8.16.2.34 E ADDITIO	ONAL REQUIREM	IENTS FOR CH		TH SPECIAL	NEEDS					Not Inspected	
8.16.2.34 F NIGHT (CARE									Not Inspected	
8.16.2.34 G PHYSIC	AL ENVIRONME	NT								Compliance	
										Dogo 1 of 2	

Center Name:	License Number:	Date:	
Oleidys Medina Perez	138733	10/24/2017	
Services & Care	e of Children		
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
8.16.2.34 L FIELD TRIPS			Not Inspected
Food Se	rvice	•	
8.16.2.35 B MEALS AND SNACKS			Compliance
8.16.2.35 C MENUS			Compliance
8.16.2.35 D KITCHENS			Compliance
8.16.2.35 E MEAL TIMES			Compliance
Health & Safety F	Requirements		
8.16.2.36 A HYGIENE			Compliance
8.16.2.36 B FIRST AID REQUIREMENTS			Compliance
8.16.2.36 C MEDICATION			Not Inspected
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES			Not Inspected
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES			Compliance
Buildings, Grou	nds & 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 DRU	STANCES	Compliance	
8.16.2.38 I PETS		Compliance	

Please note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans as noted above, may result in further action taken against the licensee.

IN

10/24/2017

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Date Facility Rep:Oleidys Medina