Provider Name:			Address:						Phone:	Phone:	
Olga Hernandez			Las Cruces, NM 88005					(575)524-83	(575)524-8301		
Registration Num	Issue Date:	Expiration D	Date:	Type:				Status:	-		
52160	10/1/2016	09/30/2017	30/2017 Child Care Reg. Self-Cert Part Registered								
Capacity				•			Ce	nsus			
Over Age 2: 4	Under Age 2:	2 Night	Care:	0	Playground	: 0	Ove	er 2: 1	Unde	er 2: 1	
Days and Hours of	Operation						<u>.</u>				
	<u>Monday</u>	Tuesday	<u>w</u>	ednesda	<u>y Th</u>	<u>ursday</u>	<u>Fri</u>	<u>day</u>	<u>Saturday</u>	Sunday	
Opening Times	: 07:30 AM	07:30 AN	4 (07:30 AM	07	:30 AM	07:3	O AM	Closed	Closed	
Closing Times	: 05:30 PM	05:30 PN	Л (05:30 PM	05	30 PM	05:3	0 PM			
# of Classrooms:	F	urpose:	•		Date:	•		Т	ime:		
0	A	nnual			08/22/2	017		1	0:16 AM		
Commente							•				

Comments

Caregiver is a Subsidy and Food Program Participant, her food sponsor is FYI NM.

Last food sponsor visit was on 1/23/2017.

Total children present at the home: 2 Non-Resident

Ages: 3 years old and 1.5 years old.

Caregiver cares for 4 non-resident children ages 1.5, 3, 7, and 2 years old.

Background Checks Clearance Date

Caregiver: 10/01/2014 Spouse: 9/26/2016.

Training

First Aid/CPR certification expires on 12/2017.

Health and Safety Training completed but does not have a date on certificate.

Infant Training Completed on 7/01/2017.

Total Training Hours for current registration year: 7 hours Total Training Hours for last registration year: 12 hours.

Note:

Fire extinguisher certification expires on 08/2018.

Hot water is at 125 degrees.

Pets: Caregiver has 3 dogs named Flex, Casper, and Rosie.

Caregiver's daughter was at the home at the time of the visit, per the caregiver she does not live in the home or spend a significant amount of time during child care hours.

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Registration				
8.17.2.11 A,B BACKGROUND CHECKS	Compliance			
8.17.2.11 C OTHER PERSONS BACKGROUND CHECKS	N/A			
8.17.2.11 E DOCUMENTATION	Compliance			
8.17.2.13 VISITS BY AGENCY AND REGISTERED AUTHORITY	Compliance			
8.17.2.14 A-C NON-TRANSFERABILITY OF REGISTRATION	Compliance			
8.17.2.15 A-C INCIDENT REPORTS	Compliance			

Survey Report Form Page 1 of 3

^{***}This Annual Home Inspection is being conducted by Child Care Specialist Jose Morales***

Provider Name: Olga Hernandez	Registration Number: 52160	Date: 08/22/2017		
		00/22/2017		
8.17.2.24 RECORD KEEPING REQUIREMENTS	ing Requirements		Compliance	
			Соттриалос	
8.17.2.10 A CAREGIVER REIMBURSEMENTS	Requirements		Compliance	
8.17.2.10 B AGE REQUIREMENT		Compliance		
8.17.2.10 E F CAREGIVER REPORTING				
8.17.2.10 G PRIMARY AND SUBSTITUTE CAREGIVER TRAINING				
8.17.2.10 H PRIMARY AND SUBSTITUTE CAREGIVER TRAINING				
8.17.2.10 I PRIMARY CAREGIVER FOR INFANTS				
8.17.2.10 K CPR AND FIRST AID CERTIFICATION	Compliance			
8.17.2.10 L COMPETENCY TRAINING			Compliance	
	Composition			
8.17.2.21 A NON-RESIDENT CHILDREN			Compliance	
8.17.2.21 B CHILDREN UNDER 2				
8.17.2.21 C CHILDREN UNDER 6				
8.17.2.21 D DROP IN CHILDREN				
8.17.2.21 E SHIFT CHANGES				
8.17.2.21 F CAREGIVER INVOLVEMENT			Compliance	
Health & Saf	ety Requirements			
8.17.2.22 A SAFE CONDITION			Compliance	
8.17.2.22 B, C ELECTRICAL OUTLETS			Compliance	
8.17.2.22 D TEMPERATURE			Compliance	
8.17.2.22 E VENTILATION			Compliance	
8.17.2.22 F HEATERS AND HEATING UNITS			N/A	
8.17.2.22 G HOT AND COLD RUNNING WATER			Non-compliance	
<u>Deficiencies</u> Water coming from faucet is not below 110 degrees Fahrenheit.				
Hot water is at 125 degrees. Regulation: 8.17.2.22G				
Corrective Action Plan				
Water coming from faucet will be below 110 degrees Fahrenheit in all an children. A home may install a water tempering control valve ahead of a				
piping. Date to be Completed: 09/22/2017				
8.17.2.22 H, I, J INSIDE AND OUTSIDE PLAY AREAS			Compliance	
8.17.2.22 K STORAGE OF DANGEROUS MATERIALS		Compliance		
8.17.2.22 L WORKING TELEPHONE			Compliance	
8.17.2.22 M EMERGENCY NUMBERS			Compliance	

Survey Report Form Page 2 of 3

Provider Name: Olga Hernandez	Registration Number: 52160	Date: 08/22/2017	
Health & Saf	fety Requirements		
8.17.2.22 N SMOKE / CARBON MONOXIDE DETECTOR			Compliance
8.17.2.22 O,P FIREARM SAFETY/STORAGE			N/A
8.17.2.22 Q. SMOKING, ALCOHOL, AND ILLEGAL DRUG USE			Compliance
8.17.2.22 R FIRE EXTINGUISHER			Compliance
8.17.2.22 S COMBUSTIBLE AND FLAMMABLE MATERIALS			Compliance
8.17.2.22 T EMERGENCY EVACUATION AND DIASTER PREPAREDNES	S PLAN		Compliance
8.17.2.22 U MAJOR EXITS			Compliance
8.17.2.22 V TOYS, OBJECTS AND CRIB STANDARDS			Compliance
8.17.2.22 W TOILET ROOMS			Compliance
8.17.2.22 X FIRST AID KIT			Compliance
8.17.2.22 Y PETS			Compliance
8.17.2.22 Z DIAPER CHANGING			Compliance
8.17.2.22 AA TRANSPORTATION			Compliance
Meal R	equirements		
8.17.2.23 H REFRIGERATION			Compliance
8.17.2.23 I REFRIGERATOR THERMOMETERS			Compliance
Caregiver's	Responsibilities		
8.17.2.25 A,B SUPERVISION			Compliance
8.17.2.25 C GUIDANCE			Compliance
8.17.2.25 D POLICIES AND PROCEDURES FOR EXPULSION			Compliance
8.17.2.25 E ACTIVITIES AND EXPERIENCES			Compliance
8.17.2.25 F CARING FOR INFANTS			N/A
8.17.25 G. REST PERIODS			Compliance
8.17.25 H SWIMMING, WADING AND WATER			N/A

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 provider.

grammer 118

08/22/2017

Olga Lorand

08/22/2017

Surveyor:Jose Morales Date Provider Rep:Olga Hernandez

Page 3 of 3

Date