

Center Name:			Address:						Phone:	Phone:	
Region IX Head Start - Capitan			555 Highway 48 Capitan, NM 88316					(575)354	(575)354-2243		
License Number:	Issue Date:	Expiration [	on Date: Type: Status:								
69560	11/29/2016	11/28/2017		5 Star Child Care Center Licensed			Licensed				
Capacity							Cer	sus			
Over Age 2: 29	Under Age 2:	0 Night	Care:	0 P	layground:	42	Ove	r 2: (	U	Inder 2:	0
Days and Hours of Operation											
	<u>Monday</u>	<u>Tuesda</u>	<u>w</u>	ednesday	Thursda	<u>ay</u>	<u>Friday</u>		<u>y</u> <u>Saturday</u>		<u>Sunday</u>
Opening Times:	07:45 AM	07:45 AN	Л	07:45 AM	07:45 Al	M			Closed		Closed
Closing Times	12:45 PM	12:45 PM	Л	12:45 PM	12:45 PI	М					
# of Classrooms:	Pt	urpose:			Date:			1	ime:		
1	Ot	ther			05/11/2017			C	9:37 AM		
Comments  Facility submitted the educator's current background Check Eligibility Letter as referenced in Semi Annual Survey daed 3/23/2017. In											

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

compliance with current state regulations.

Licensure				
8.16.2.11 A TYPES OF LICENSES	N/A			
8.16.2.11 B RENEWAL OF LICENSE	N/A			
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	N/A			
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	N/A			
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	N/A			
8.16.2.18 D COMPLAINTS	N/A			
8.16.2.21 A LICENSING REQUIREMENTS	N/A			
8.16.2.21 B CAPACITY OF CENTERS	N/A			
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	N/A			
Administrative Requirements				
8.16.2.22 A ADMINISTRATION RECORDS	N/A			
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	N/A			
8.16.2.22 C POLICY AND PROCEDURES	N/A			
8.16.2.22 D FAMILY HANDBOOK	N/A			
8.16.2.22 E CHILDREN'S RECORDS	N/A			
8.16.2.22 F PERSONNEL RECORDS	Compliance			
8.16.2.22 G PERSONNEL HANDBOOK	N/A			
Personnel & Staffing				
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	N/A			
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING	N/A			

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:			
Region IX Head Start - Capitan	69560	05/11/2017			
	Personnel & Staffing				
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES			N/A		
Services & Care of Children					
8.16.2.24 A GUIDANCE			N/A		
8.16.2.24 B NAPS OR REST PERIOD		N/A			
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND		N/A			
8.16.2.24 D DIAPERING AND TOILETING		N/A			
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WI		N/A			
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE		N/A			
8.16.2.24 G PHYSICAL ENVIRONMENT		N/A			
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMEN		N/A			
8.16.2.24 I EQUIPMENT AND PROGRAM			N/A		
8.16.2.24 J OUTDOOR PLAY AREAS		N/A			
8.16.2.24 K SWIMMING, WADING AND WATER		N/A			
8.16.2.24 L FIELD TRIPS			N/A		
	Food Service				
8.16.2.25 B MEALS AND SNACKS			N/A		
8.16.2.25 C MENUS		N/A			
8.16.2.25 D KITCHENS		N/A			
8.16.2.25 E MEAL TIMES		N/A			
Healt	h & Safety Requirements				
8.16.2.26 A HYGIENE			N/A		
8.16.2.26 B FIRST AID REQUIREMENTS		N/A			
8.16.2.26 C MEDICATION			N/A		
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		N/A			
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENT	ERS		N/A		
Build	dings, Grounds & Safety				
8.16.2.29 A HOUSEKEEPING			N/A		
8.16.2.29 B PEST CONTROL		N/A			
8.16.2.29 C MECHANICAL SYSTEMS		N/A			
8.16.2.29 D WATER AND WASTE		N/A			
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL		N/A			
8.16.2.29 F EXITS AND WINDOWS		N/A			
8.16.2.29 G TOILET AND BATHING FACILITIES		N/A			
8.16.2.29 H SAFETY COMPLIANCE		N/A			

Survey Report Form Page 2 of 3

Center Name:	License Number:	Date:	1				
Region IX Head Start - Capitan	69560	05/11/2017					
Buildings, Grounds & Safety							
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES  N/A							
8.16.2.29 J PETS	N/A						
0.10.2.29 J FE13			IW/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 licensee.

05/11/2017

05/11/2017

Surveyor: Sandra Connolly

Date

Facility Rep:Joanie Bingerman

Date