Center Name:			Address:					Phone:	
Samantha Pierce			1009 Pile Clovis, NM 88101					(575)749-63	347
License Number:	Issue Date:	Expiration D	Date:	Туре:			Status:	itus:	
150915	01/11/2017	01/10/2018		2 Star Family Child Care Home Licensed		Licensed			
Capacity			-			Cei	nsus		
Over Age 2: 4	Under Age 2:	2 Night 0	Care: 0 Playground: 0 Ove		2: - Under 2: -				
Days and Hours of Operation									
	<u>Monday</u>	<u>Tuesday</u>	<u>w</u>	ednesday	<u>Thursday</u>	Fri	<u>day</u>	Saturday	<u>Sunday</u>
Opening Times:	07:00	07:00		07:00	07:00	07	:00	Closed	Closed
Closing Times	05:30 P	05:30 P	-	05:30 P	05:30 P	05:	30 P		
# of Classrooms:	Pu	rpose:			Date:		Ti	me:	
1	Fo	llow-up			07/05/2017		30	3:29 AM	
0		•	•	•			•		

Comments

Follow up to survey on 06/01/2017. Spoke to Samantha on the phone about the Deficiencies found on her Semi-Annual survey she has not cleared the deficiencies. She was given two additional weeks to clear.

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED	BELOW:
Licensure	
8.16.2.31 A LICENSING REQUIREMENTS	Not Inspected
8.16.2.31 B CAPACITY OF A HOME	Not Inspected
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.32 A ADMINISTRATIVE RECORDS	Not Inspected
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.32 C PARENT HANDBOOK	Not Inspected
8.16.2.32 D CHILDREN'S RECORDS	Non-compliance
Deficiencies Of the 6 children's records reviewed, 1 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.32 form for the child(ren) with no immunization/exemption. Regulation: 8.16.2.32D(1)(e) Corrective Action Plan The home will review a child's record to ensure complete information has been obtained before a child is admitted. Date to be Completed: 07/19/2017	
8.16.2.32 E PERSONNEL RECORDS	Non-compliance

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:
Samantha Pierce	150915	07/05/2017

Administrative Requirements

Deficiencies

The home does not have documentation of a background check within 5 years for care giver(s); person(s) over 18 years of age and older living in the home.

Regulation: 8.16.2.32E(1)

Corrective Action Plan

Documentation of a background check and employment history verification for all staff members and all adults living in the home. A background check must be conducted at least once every five years on all required individuals.

Date to be Completed: 07/19/2017

Date to be Completed. 01/18/2017	
8.16.2.32 F PERSONNEL HANDBOOK	Not Inspected
Personnel & Staffing	
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	Not Inspected
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	Not Inspected
Services & Care of Children	
8.16.2.34 A GUIDANCE	Not Inspected
8.16.2.34 B NAPS OR REST PERIOD	Not Inspected
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	Not Inspected
8.16.2.34 D DIAPERING AND TOILETING	Not Inspected
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Not Inspected
8.16.2.34 F NIGHT CARE	Not Inspected
8.16.2.34 G PHYSICAL ENVIRONMENT	Not Inspected
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Not Inspected
8.16.2.34 I EQUIPMENT AND PROGRAM	Not Inspected
8.16.2.34 J OUTDOOR PLAY	Not Inspected
8.16.2.34 K SWIMMING, WADING AND WATER	Not Inspected
8.16.2.34 L FIELD TRIPS	Not Inspected
Food Service	
8.16.2.35 B MEALS AND SNACKS	Not Inspected
8.16.2.35 C MENUS	Not Inspected
8.16.2.35 D KITCHENS	Not Inspected
8.16.2.35 E MEAL TIMES	Not Inspected
Health & Safety Requirements	
8.16.2.36 A HYGIENE	Not Inspected
8.16.2.36 B FIRST AID REQUIREMENTS	Not Inspected
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	Not Inspected

Survey Report Form Page 2 of 3

Samantha Pierce	150915	07/05/2017			
Buildings, Grounds & Safety					
8.16.2.38 A HOUSEKEEPING		Not Inspected			
8.16.2.38 B PEST CONTROL	Not Inspected				
8.16.2.38 C MECHANICAL SYSTEMS	Not Inspected				
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL	Not Inspected				
8.16.2.38 E EXITS	Not Inspected				
8.16.2.38 F TOILET AND BATHING FACILITIES	Not Inspected				
8.16.2.38 G SAFETY COMPLIANCE	Not Inspected				
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	Not Inspected				
8.16.2.38 I PETS		Not Inspected			

License Number:

Date:

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.

07/05/2017

On file

07/05/2017

Surveyor:Susie Aragon

Date

Facility Rep:Samantha Pierce

Page 3 of 3

Date

Center Name: