

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name: Address: Phone: 740 Lees Dr. Sara Guadalupe Ramos (575)526-0971 Las Cruces, NM 88001 License Number: Issue Date: **Expiration Date:** Type: Status: 102218 11/1/2016 10/31/2017 2 Star Family Child Care Home Licensed Census Capacity 2 Night Care: Playground: Over Age 2: 4 Under Age 2: 0 0 Over 2: 2 Under 2: 0 Days and Hours of Operation Wednesday Thursday Friday Saturday Sunday Monday Tuesday 12:00 AM **Opening Times:** 12:00 AM Closing Times: Time: # of Classrooms: Date: Purpose: 1 Follow-up 04/25/2017 03:39 PM Comments Follow up to complaint survey conducted on 11-15-16. All corrections have been completed. A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW: Licensure N/A 8.16.2.31 A LICENSING REQUIREMENTS Compliance 8.16.2.31 B CAPACITY OF A HOME 8.16.2.31 C INCIDENT REPORTING REQUIREMENTS N/A **Administrative Requirements** 8.16.2.32 A ADMINISTRATIVE RECORDS N/A N/A 8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT N/A 8.16.2.32 C PARENT HANDBOOK 8.16.2.32 D CHILDREN'S RECORDS N/A N/A 8.16.2.32 E PERSONNEL RECORDS N/A 8.16.2.32 F PERSONNEL HANDBOOK **Personnel & Staffing** 8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS N/A N/A 8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING Services & Care of Children N/A 8.16.2.34 A GUIDANCE 8.16.2.34 B NAPS OR REST PERIOD N/A 8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS N/A N/A 8.16.2.34 D DIAPERING AND TOILETING 8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS N/A N/A 8.16.2.34 F NIGHT CARE 8.16.2.34 G PHYSICAL ENVIRONMENT N/A

Center Name:	License Number:	Date:	
Sara Guadalupe Ramos	102218	04/25/2017	
Services & Ca	are of Children		
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT			N/A
8.16.2.34 I EQUIPMENT AND PROGRAM			N/A
8.16.2.34 J OUTDOOR PLAY			N/A
8.16.2.34 K SWIMMING, WADING AND WATER			N/A
8.16.2.34 L FIELD TRIPS			N/A
Food S	Service		
8.16.2.35 B MEALS AND SNACKS			N/A
8.16.2.35 C MENUS			N/A
8.16.2.35 D KITCHENS			N/A
8.16.2.35 E MEAL TIMES			N/A
Health & Safety	y Requirements		
8.16.2.36 A HYGIENE			N/A
8.16.2.36 B FIRST AID REQUIREMENTS			N/A
8.16.2.36 C MEDICATION			N/A
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES			N/A
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES			N/A
Buildings, Gro	ounds & Safety		
8.16.2.38 A HOUSEKEEPING			N/A
8.16.2.38 B PEST CONTROL			N/A
8.16.2.38 C MECHANICAL SYSTEMS			N/A
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL			N/A
8.16.2.38 E EXITS			N/A
8.16.2.38 F TOILET AND BATHING FACILITIES			N/A
8.16.2.38 G SAFETY COMPLIANCE			N/A
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		STANCES	N/A
8.16.2.38 I PETS			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 licensee.

Image: Complexity of the complexity of the corrective action plans as noted above, may result in further action taken against the licensee.

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