

<b>Center Name:</b> Sara Guadalupe Ramos		<b>Address:</b> 740 Lees Dr. Las Cruces, NM 88001			<b>Phone:</b> (575)526-0971			
<b>License Number:</b> 102218	<b>Issue Date:</b> 11/1/2016	<b>Expiration Date:</b> 10/31/2017	<b>Type:</b> 2 Star Family Child Care Home		<b>Status:</b> Licensed			
<b>Capacity</b>					<b>Census</b>			
Over Age 2:	4	Under Age 2:	2	Night Care:	0	Playground:	0	
					Over 2:	4	Under 2:	0
<b>Days and Hours of Operation</b>								
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>	
Opening Times:	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	
Closing Times:	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	
<b># of Classrooms:</b> 1	<b>Purpose:</b> Annual			<b>Date:</b> 08/09/2017	<b>Time:</b> 02:50 PM			
<b>Comments</b> Media and Visitor regulations were reviewed with the Provider.								

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	Compliance
8.16.2.31 B CAPACITY OF A HOME	Compliance
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Compliance
Administrative Requirements	
8.16.2.32 A ADMINISTRATIVE RECORDS	Compliance
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  <u>Deficiencies</u> Of the 4 children's records reviewed, 4 does/do not have any personal or emergency information on file. See the Children's Records 8.16.2.32 form for the name of any child needing a complete record.  <b>Regulation:</b> 8.16.2.32D(1)(2)  <u>Corrective Action Plan</u> The home will review enrollment procedures to ensure complete personal and emergency information is on file before a child is admitted.  <b>Date to be Completed:</b> 09/09/2017	Non-compliance
8.16.2.32 E PERSONNEL RECORDS	Compliance
8.16.2.32 F PERSONNEL HANDBOOK	Not Inspected
Personnel & Staffing	
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	Compliance
Services & Care of Children	

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<b>Services &amp; Care of Children</b>		
8.16.2.34 A GUIDANCE		Compliance
8.16.2.34 B NAPS OR REST PERIOD		Compliance
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		Compliance
8.16.2.34 D DIAPERING AND TOILETING		Compliance
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		Compliance
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 <b>Deficiencies</b> The fall zone underneath the swings is not adequate as evidenced by the resilient material is not deep enough. Sand/dirt has become packed, needs to be tilled. <b>Regulation:</b> 8.16.2.34J(3) <b>Corrective Action Plan</b> A resilient surface will be provided beneath the play equipment and a schedule will be devised to provide routine checks. <b>Date to be Completed:</b> 09/09/2017		Non-compliance
8.16.2.34 K SWIMMING, WADING AND WATER		N/A
8.16.2.34 L FIELD TRIPS		Compliance
<b>Food Service</b>		
8.16.2.35 B MEALS AND SNACKS		Compliance
8.16.2.35 C MENUS <b>Deficiencies</b> Weekly menus are not posted at least one week in advance. Dates on menu did not match current month. <b>Regulation:</b> 8.16.2.35C(1) <b>Corrective Action Plan</b> A dated weekly menu will be posted in an area visible to parents. Menus shall be posted at least one week in advance, in a conspicuous place, for review by parents, educators and children. CORRECTED ON SITE. <b>Date to be Completed:</b> 08/09/2017		Non-compliance
8.16.2.35 D KITCHENS		Compliance
8.16.2.35 E MEAL TIMES		Compliance
<b>Health &amp; Safety Requirements</b>		
8.16.2.36 A HYGIENE		Compliance
8.16.2.36 B FIRST AID REQUIREMENTS		Compliance
8.16.2.36 C MEDICATION		Compliance
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES		Compliance

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<b>Health &amp; Safety Requirements</b>		
<b>8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES</b>	Compliance	
<b>Buildings, Grounds &amp; Safety</b>		
<b>8.16.2.38 A HOUSEKEEPING</b> <u><b>Deficiencies</b></u> The premises are not in good repair as evidenced by in the playground area a small plastic window is cracked by the homes entryway and some of the toys have cobwebs, in the classroom area some of the napping mats are torn. <b>Regulation:</b> 8.16.2.38A(1) <u><b>Corrective Action Plan</b></u> Repairs will be completed and a system for routine inspection of the home and premises will be established. <b>Date to be Completed:</b> 09/09/2017	Non-compliance	
<b>8.16.2.38 B PEST CONTROL</b>	Compliance	
<b>8.16.2.38 C MECHANICAL SYSTEMS</b> <u><b>Deficiencies</b></u> The temperature in Combination Class childcare room(s) used by children exceeds 82 degrees Fahrenheit. Was at 91 Degrees. Provider turned on the a/c and room had lowered to 86 Degrees after a few minutes. <b>Regulation:</b> 8.16.2.38C(1) <u><b>Corrective Action Plan</b></u> A temperature between 68 degrees through 82 degrees Fahrenheit will be maintained in all rooms used by children. <b>Date to be Completed:</b> 09/09/2017	Non-compliance	
<b>8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL</b>	Compliance	
<b>8.16.2.38 E EXITS</b>	Compliance	
<b>8.16.2.38 F TOILET AND BATHING FACILITIES</b> <u><b>Deficiencies</b></u> The toilet room used by children in care is missing disposable towels. CORRECTED ON SITE. <b>Regulation:</b> 8.16.2.38F(1) <u><b>Corrective Action Plan</b></u> The toilet room will be restocked and a routine established to monitor for adequate supplies. <b>Date to be Completed:</b> 08/09/2017	Non-compliance	
<b>8.16.2.38 G SAFETY COMPLIANCE</b> <u><b>Deficiencies</b></u> The home failed to conduct a fire drill for the month(s) of April; May; June; July. <b>Regulation:</b> 8.16.2.38G(3) <u><b>Corrective Action Plan</b></u> A monthly fire drill will be held and recorded. <b>Date to be Completed:</b> 09/09/2017	Non-compliance	

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**Buildings, Grounds & Safety**

**Deficiencies**

An operable smoke detector is missing in each child activity room. Battery is low, detector is beeping.

**Regulation:** 8.16.2.38G(1)

**Corrective Action Plan**

An operable smoke detector will be in each activity and sleeping room.

**Date to be Completed:** 09/09/2017

<b>8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES</b>	Compliance
<b>8.16.2.38 I PETS</b>	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.**

*Crystal Estrada*  
4:05

08/09/2017

*Signature on file*

08/09/2017

Surveyor:Crystal Estrada	Date	Facility Rep:Sara Guadalupe Ramos	Date
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