

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:	Address		Phone:	Phone:						
Sara Iglesias			331 LFD Rd. Roswell, NM 88203					(575)31	(575)317-2961	
License Number:	Issue Date:	Expiration	Date:	Туре:			Status:			
107959	05/11/2017	02/8/2018		2 Star Grou	p Child Care Home		Licensed			
Capacity						Ce	nsus			
Over Age 2: 6	Under Age 2:	4 Nigł	t Care:	0 PI	ayground: 0	Ove	er 2:	- l	Jnder 2: -	
Days and Hours of	Operation									
Opening Times	<u>Monday</u> 05:00	<u>Tueso</u> 05:0		<u>Vednesday</u> 05:00	<u>Thursday</u> 05:00		<u>day</u> :00	<u>Saturday</u> Closed	<u>Sunday</u> Closed	
Closing Times		11:00		11:00 P	11:00 P		.00 D0 P	Closed	Closed	
# of Classrooms:		Purpose:			Date:			Time:		
2		Follow-up			05/26/2017			03:20 PM		
Comments All Deficiencies have	e been cleared	through E-mail								
A SUR	VEY OF YOUR FAC	ILITY HAS BEEN N	ADE AND YO	U ARE NOTIFIE	D OF NON-COMPLIANCE	OF THE	REGULATIO	ONS AS NOTED	BELOW:	
				Licer	isure					
8.16.2.31 A LICENS		MENTS							Not Inspected	
8.16.2.31 B CAPAC	ITY OF A HOME								Not Inspected	
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS							Not Inspected			
			Adm	inistrative	Requirements					
8.16.2.32 A ADMINI	STRATIVE REC	ORDS							Compliance	
8.16.2.32 B MISSIO	N, PHILOSOPH	Y AND CURRICI	JLUM STAT	EMENT					Not Inspected	
8.16.2.32 C PAREN	T HANDBOOK								Not Inspected	
8.16.2.32 D CHILDR	REN'S RECORD	S							Compliance	
8.16.2.32 E PERSO	NNEL RECORD	s							Not Inspected	
8.16.2.32 F PERSO	NNEL HANDBO	ок							Not Inspected	
				Personnel	& Staffing				_	
8.16.2.33 A PERSO	NNEL AND STA	FFING REQUIRI	MENTS						Not Inspected	
8.16.2.33 B STAFF	QUALIFICATION	NS AND TRAINII	IG						Not Inspected	
			Ser	vices & Ca	re of Children					
8.16.2.34 A GUIDAN	ICE								Not Inspected	
8.16.2.34 B NAPS C	OR REST PERIO	D							Not Inspected	
8.16.2.34 C ADDITIO	ONAL REQUIRE	MENTS FOR IN	FANTS AND	TODDLERS					Not Inspected	
8.16.2.34 D DIAPER		ETING							Not Inspected	
8.16.2.34 E ADDITIO	ONAL REQUIRE	MENTS FOR CH	IILDREN WI	TH SPECIAL	NEEDS				Not Inspected	
8.16.2.34 F NIGHT (CARE								Not Inspected	
8.16.2.34 G PHYSIC	AL ENVIRONM	ENT							Not Inspected	

Center Name:	License Number:	Date:	
Sara Iglesias	107959	05/26/2017	
Services & C	are of Children		
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT			Not Inspected
8.16.2.34 I EQUIPMENT AND PROGRAM			Compliance
8.16.2.34 J OUTDOOR PLAY			Compliance
8.16.2.34 K SWIMMING, WADING AND WATER			N/A
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 & Safe	ty 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
Buildings, G	rounds & 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			Compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL	STANCES	Not Inspected	
8.16.2.38 I PETS			Not Inspected

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.

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Facility Rep:Sara Iglesias

05/26/2017

Date

05/26/2017

Surveyor:Susie Aragon

Survey Report Form

Date