



## Facility

**Name:** *St. Joseph Mission School* **License Number:** *165909*  
**Address:** *26 School Road, San Fidel, NM 87049*  
**Phone:** *5055526362* **Fax:**  **E-mail:** *aleon@stjosephmissionschool.org*

## License Information

**Type:** *2 Star + Child Care Center* **Status:** *Licensed* **Issue Date:** *11/21/2018* **Expiration Date:** *11/20/2019*

## Capacity

**Over Age 2:** *17* **Under Age 2:** *0* **Night Care:** *0* **Playground:** *19*  
**Square Footage:** *0*

## Census

**Over 2:** *0* **Under 2:** *0*

## Classrooms

**Number of Classrooms:** *1*

## Days and Hours of Operation

<b>Monday</b> <i>Closed</i>	<b>Tuesday</b> <i>7:30 AM - 3:30 PM</i>	<b>Wednesday</b> <i>7:30 AM - 3:30 PM</i>	<b>Thursday</b> <i>7:30 AM - 3:30 PM</i>	<b>Friday</b> <i>7:30 AM - 3:30 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

## Inspection

**Date:** *11/02/2018* **Time In:** *9:03 AM* **Time Out:** *9:09 AM* **Purpose:** *Follow-up*

## Licensure

8.16.2.11 A Types of Licenses	<i>Not Inspected</i>
8.16.2.11 B Renewal of License	<i>Not Inspected</i>
8.16.2.11 D Non-transferable Restrictions of License	<i>Not Inspected</i>
8.16.2.12 A, K, M Licensing Actions and Administrative Appeals	<i>Not Inspected</i>
8.16.2.17 E, F Surveys for Child Care Facilities	<i>Not Inspected</i>
8.16.2.18 D Complaints	<i>Not Inspected</i>
8.16.2.21 A Licensing Requirements	<i>Not Inspected</i>
8.16.2.21 B Capacity of Centers	<i>Not Inspected</i>

**Licensure (*continued*)**

8.16.2.21 C Incident Reporting Requirements	<i>Not Inspected</i>
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**Administrative Requirements**

8.16.2.22 A Administrative Records	<i>Not Inspected</i>
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8.16.2.22 B Mission, Philosophy and Curriculum Statement	<i>Not Inspected</i>
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8.16.2.22 C Policy and Procedures	<i>Not Inspected</i>
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8.16.2.22 D Family Handbook	<i>Not Inspected</i>
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8.16.2.22 E Children's Records	<i>Not Inspected</i>
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8.16.2.22 F Personnel Records	<i>Compliance</i>
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8.16.2.22 G Personnel Handbook	<i>Not Inspected</i>
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**Personnel & Staffing**

8.16.2.23 A Personnel and Staffing Requirements	<i>Not Inspected</i>
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8.16.2.23 B Staff Qualifications and Training	<i>Not Inspected</i>
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8.16.2.23 C Staff/Child Ratios and Group Sizes	<i>Not Inspected</i>
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**Services & Care of Children**

8.16.2.24 A Guidance	<i>Not Inspected</i>
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8.16.2.24 B Naps or Rest Period	<i>Not Inspected</i>
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8.16.2.24 C Additional Requirements for Infants and Toddlers	<i>Not Inspected</i>
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8.16.2.24 D Diapering and Toileting	<i>Not Inspected</i>
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8.16.2.24 E Additional Requirements for Children with Special Needs	<i>Not Inspected</i>
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8.16.2.24 F Additional Requirements for Night Care	<i>Not Inspected</i>
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8.16.2.24 G Physical Environment	<i>Not Inspected</i>
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8.16.2.24 H Social-Emotional Responsive Environment	<i>Not Inspected</i>
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8.16.2.24 I Equipment and Program	<i>Not Inspected</i>
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8.16.2.24 J Outdoor Play Areas	<i>Not Inspected</i>
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8.16.2.24 K Swimming, Wading and Water	<i>Not Inspected</i>
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8.16.2.24 L Field Trips	<i>Not Inspected</i>
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**Food Service**

8.16.2.25 B Meals and Snacks	<i>Not Inspected</i>
8.16.2.25 C Menus	<i>Not Inspected</i>
8.16.2.25 D Kitchens	<i>Not Inspected</i>
8.16.2.25 E Meal Times	<i>Not Inspected</i>

**Health & Safety Requirements**

8.16.2.26 A Hygiene	<i>Not Inspected</i>
8.16.2.26 B First Aid Requirements	<i>Not Inspected</i>
8.16.2.26 C Medication	<i>Not Inspected</i>
8.16.2.27 A-D Illness Requirements for Centers	<i>Not Inspected</i>
8.16.2.28 A-H Transportation Requirements for Centers	<i>Not Inspected</i>

**Buildings, Grounds & Safety**

8.16.2.29 A Housekeeping	<i>Not Inspected</i>
8.16.2.29 B Pest Control	<i>Not Inspected</i>
8.16.2.29 C Mechanical Systems	<i>Not Inspected</i>
8.16.2.29 D Water and Waste	<i>Not Inspected</i>
8.16.2.29 E Lighting, Lighting Fixtures and Electrical	<i>Not Inspected</i>
8.16.2.29 F Exits and Windows	<i>Not Inspected</i>
8.16.2.29 G Toilet and Bathing Facilities	<i>Not Inspected</i>
8.16.2.29 H Safety Compliance	<i>Not Inspected</i>
8.16.2.29 H3(f)(i)(k) Safety Compliance	<i>Not Inspected</i>
8.16.2.29 J Pets	<i>Not Inspected</i>

**Additional Comments**

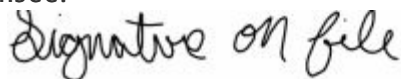
*Follow up Survey for annual completed 10/03/2018. All corrective action plans have been completed.*

**Signatures**

Please Note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans noted above, may result in further action taken against the licensee.



Surveyor: *Nicole Denney*



Facility Representative: *Anadine Leon*