Center Name: Sylvia Solis			Address: 19706 Hwy. 28 San Miguel, NM 88058				Phone: (575)650-3972		
License Number: Issue Date: Expiration D		Date: Type: St			Status:	•			
89114	10/13/2016	10/12/2017	2 Sta	2 Star Group Child Care Home Licensed					
Capacity			•		Ce	nsus			
Over Age 2: 8	Under Age 2:	4 Night C	Care: 0	Playground:	0 Ov	er 2: 1	Under	2: 1	
Days and Hours of Operation									
	<u>Monday</u>	Tuesday	<u>/ Wednes</u>	day Thurso	<u>day</u> <u>Fr</u>	<u>iday</u>	Saturday	Sunday	
Opening Times	06:00 AM	06:00 AM	1 06:00 A	M 06:00	AM 05:0	00 AM	Closed	Closed	
Closing Times	: 06:00 PM	06:00 PM	1 06:00 F	PM 06:00 I	PM 06:0	00 PM			
# of Classrooms:	F	Purpose:		Date:		Tir	me:		
1	A	Annual		08/24/2017		01	:00 PM		
Comments CPR/1st Aid certification expires 8/29/19 for both educators. Renewal of CPR/1st aid is scheduled on 8/26/17.									

CPR/1st Aid certification expires 8/29/19 for both educators. Renewal of CPR/1st aid is scheduled on 8/26/17.				
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 B CAPACITY OF A HOME	Compliance N/A			
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS				
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	Non-compliance			
Deficiencies Of the 12 children's records reviewed, 2 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: 09/24/2017				
8.16.2.32 E PERSONNEL RECORDS	Non-compliance			

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:	
Sylvia Solis	89114	08/24/2017	

Administrative Requirements

Deficiencies

The home does not have documentation of a background check 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: 09/01/2017

Date to be Completed: 09/01/2017	
8.16.2.32 F PERSONNEL HANDBOOK	N/A
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	
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	Compliance
8.16.2.34 F NIGHT CARE	N/A
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	Non-compliance
Deficiencies	
The fall zone underneath the slide; climber is not adequate as evidenced by the absence of	
any protective material - the surface is concrete.	
Regulation: 8.16.2.34J(3)	
Corrective Action Plan	
A resilient surface will be provided beneath the play equipment and a schedule will be	
devised to provide routine checks.	
Date to be Completed: 09/24/2017	
8.16.2.34 K SWIMMING, WADING AND WATER	N/A
8.16.2.34 L FIELD TRIPS	N/A
Food Service	
8.16.2.35 B MEALS AND SNACKS	Compliance
8.16.2.35 C MENUS	Compliance
8.16.2.35 D KITCHENS	Compliance
8.16.2.35 E MEAL TIMES	Not Inspected

Survey Report Form Page 2 of 3

Date:					
08/24/2017					
Food Service					
Health & Safety Requirements					
	Compliance				
	Compliance				
	N/A				
	Compliance				
	N/A				
Buildings, Grounds & Safety					
	Compliance				
	N/A				
	Compliance				
ES	Compliance				
	Compliance				
NC	ANCES				

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.

08/24/2017

08/24/2017

Surveyor:Emma Gonzales Date Facility Rep:Sylvia Solis Date

Conna Goyalu J:25