

Center Name: Sylvia Solis			Address: 19706 Hwy. San Miguel,		ı			Phone: (575)650	-3972
License Number:	Issue Date:	Expiration [Date:	Type:			Status:	•	
89114	10/13/2017	10/12/2018		2 Star Gro	oup Child Care Ho	ome	Licensed	Licensed	
Capacity			-			С	ensus		
Over Age 2: 8	Under Age 2:	4 Night	Care:	0	Playground:	0 0	ver 2:	1 U	Inder 2: 1
Days and Hours of	Operation					•			
	<u>Monday</u>	Tuesda	<u>y</u> <u>W</u> e	<u>ednesday</u>	Thursda	<u>ıy</u> <u>F</u>	<u>riday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	06:00 AM	06:00 AM	И 0	06:00 AM	06:00 AN	Л 06	:00 AM	Closed	Closed
Closing Times	: 06:00 PM	06:00 P	0	6:00 PM	06:00 PN	И 06	:00 PM		
# of Classrooms:		Purpose:			Date:			Time:	
1	1	Follow-up			10/30/2017			09:45 AM	
Comments Deficiency noted on	follow up survey	has been correct	ted.						

Deficiency noted on follow up survey has been corrected.	
A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS A	S 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	N/A
Administrative Requirements	,
8.16.2.32 A ADMINISTRATIVE RECORDS	N/A
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	N/A
8.16.2.32 C PARENT HANDBOOK	N/A
8.16.2.32 D CHILDREN'S RECORDS	N/A
8.16.2.32 E PERSONNEL RECORDS	Compliance
8.16.2.32 F PERSONNEL HANDBOOK	N/A
Personnel & Staffing	
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS	N/A
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING	N/A
Services & Care of Children	,
8.16.2.34 A GUIDANCE	N/A
8.16.2.34 B NAPS OR REST PERIOD	N/A
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	N/A
8.16.2.34 D DIAPERING AND TOILETING	N/A
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	N/A
8.16.2.34 F NIGHT CARE	N/A
8.16.2.34 G PHYSICAL ENVIRONMENT	N/A

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Center Name: Sylvia Solis	License Number:	Date: 10/30/2017	
Services & Care		10/00/2011	
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	or officere		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 Serv	/ice		
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 Re	equirements		
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, Ground	ds & Safety	<u> </u>	
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 DRUG	CES	N/A	
8.16.2.38 PETS			N/A
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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.

10/30/2017

10/30/2017

Date

Surveyor:Emma Gonzales

Date

Facility Rep:Sylvia Solis