



Facility

Name: *The Children's Garden on Northrise* **License Number:** *131386*
Address: *2740 Northrise Drive, Las Cruces, NM 88011*
Phone: *5755225700* **Fax:** **E-mail:** *vivian@thechildrensgardenlc.com*

License Information

Type: *5 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *01/08/2019* **Expiration Date:** *01/07/2020*

Capacity

Over Age 2: *110* **Under Age 2:** *28* **Night Care:** *0* **Playground:** *0*
Square Footage: *0*

Census

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

Classrooms

Number of Classrooms: *7*

Days and Hours of Operation

Monday <i>6:30 AM - 6:00 PM</i>	Tuesday <i>6:30 AM - 6:00 PM</i>	Wednesday <i>6:30 AM - 6:00 PM</i>	Thursday <i>6:30 AM - 6:00 PM</i>	Friday <i>6:30 AM - 6:00 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *01/11/2019* **Time In:** *2:05 PM* **Time Out:** *2:10 PM* **Purpose:** *Follow-up*

Licensure

8.16.2.11 A Types of Licenses	N/A
8.16.2.11 B Renewal of License	N/A
8.16.2.11 D Non-transferable Restrictions of License	N/A
8.16.2.12 A, K, M Licensing Actions and Administrative Appeals	N/A
8.16.2.17 E, F Surveys for Child Care Facilities	N/A
8.16.2.18 D Complaints	N/A
8.16.2.21 A Licensing Requirements	N/A
8.16.2.21 B Capacity of Centers	N/A

Licensure (continued)

8.16.2.21 C Incident Reporting Requirements	N/A
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Administrative Requirements

8.16.2.22 A Administrative Records	N/A
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8.16.2.22 B Mission, Philosophy and Curriculum Statement	N/A
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8.16.2.22 C Policy and Procedures	N/A
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8.16.2.22 D Family Handbook	N/A
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8.16.2.22 E Children's Records	N/A
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8.16.2.22 F Personnel Records	N/A
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8.16.2.22 G Personnel Handbook	N/A
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Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements	N/A
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8.16.2.23 B Staff Qualifications and Training	N/A
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8.16.2.23 C Staff/Child Ratios and Group Sizes	N/A
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Services & Care of Children

8.16.2.24 A Guidance	N/A
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8.16.2.24 B Naps or Rest Period	N/A
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8.16.2.24 C Additional Requirements for Infants and Toddlers	N/A
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8.16.2.24 D Diapering and Toileting	N/A
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8.16.2.24 E Additional Requirements for Children with Special Needs	N/A
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8.16.2.24 F Additional Requirements for Night Care	N/A
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8.16.2.24 G Physical Environment	N/A
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8.16.2.24 H Social-Emotional Responsive Environment	N/A
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8.16.2.24 I Equipment and Program	N/A
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8.16.2.24 J Outdoor Play Areas	N/A
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8.16.2.24 K Swimming, Wading and Water	N/A
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8.16.2.24 L Field Trips	N/A
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Food Service

8.16.2.25 B Meals and Snacks	N/A
8.16.2.25 C Menus	N/A
8.16.2.25 D Kitchens	N/A
8.16.2.25 E Meal Times	N/A

Health & Safety Requirements

8.16.2.26 A Hygiene	N/A
8.16.2.26 B First Aid Requirements	N/A
8.16.2.26 C Medication	N/A
8.16.2.27 A-D Illness Requirements for Centers	N/A
8.16.2.28 A-H Transportation Requirements for Centers	N/A

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping	Compliance
8.16.2.29 B Pest Control	N/A
8.16.2.29 C Mechanical Systems	N/A
8.16.2.29 D Water and Waste	N/A
8.16.2.29 E Lighting, Lighting Fixtures and Electrical	N/A
8.16.2.29 F Exits and Windows	N/A
8.16.2.29 G Toilet and Bathing Facilities	N/A
8.16.2.29 H Safety Compliance	N/A
8.16.2.29 H3(f)(i)(k) Safety Compliance	N/A
8.16.2.29 J Pets	N/A

Additional Comments

****This survey is being created at the office, site visit not conducted****

This is a follow up to a survey created on 12/14/2018.

The center director has sent a photo to licensing of the corrected deficiency.

The survey will show N/A on all areas not related to the follow up.

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: *Jose Morales*



Facility Representative: *Vivian Esparza*