Center Name:		Address: 825 West Roybal Box #1					Phone:			
Yolanda Wood-Valdez			Las Vegas, NM 87701					(505)550-9268		
License Number: Issue Date: Expiration		Date:	Date: Type: Status			Status:				
52886	03/13/2016	03/12/2017	5 Star FOCUS Group Child Care Home Licensed							
Capacity				-		Cei	nsus			
Over Age 2: 8	Under Age 2:	4 Night	Care:	0 Playground: 0 Over 2: 5 Under 2: 3			r 2: 3			
Days and Hours of	Operation									
	<u>Monday</u>	<u>Tuesda</u>	ay <u>W</u>	<u>/ednesday</u>	<u>Thursday</u>	Fri	<u>day</u>	<u>s</u>	Saturday	<u>Sunday</u>
Opening Times	: 07:45 AM	07:45 A	M (07:45 AM	07:45 AM	07:45 AM		S AM C		Closed
Closing Times	: 05:15 PM	05:15 P	M (05:15 PM	05:15 PM	05:1	05:15 PM			
# of Classrooms:	ı	Purpose:			Date:			Tim	e:	
1	1	Annual			01/04/2017			12:4	5 PM	
Comments										
Spoke with and educated provider on new Regs. Talked to provider about maintaining playground.										

Spoke with and educated provider on new Regs. Talked to provider about maintaining playground.				
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 A LICENSING REQUIREMENTS	Compliance			
8.16.2.31 B CAPACITY OF A HOME	Compliance			
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Compliance			
Administrative Requirements				
8.16.2.32 A ADMINISTRATIVE RECORDS	Compliance			
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance			
8.16.2.32 C PARENT HANDBOOK	Non-compliance			
The child care home does not have a complete parent handbook. The following general information needs to be included: Expulsion policies. The home's policies and procedures regarding the following need to be included: policies and procedures for expulsion of children Regulation: 8.16.2.32C(1)(2) Corrective Action Plan A parent handbook with required general information and policies and procedures will be completed and distributed. Date to be Completed: 02/04/2017				
8.16.2.32 D CHILDREN'S RECORDS	Compliance			
8.16.2.32 E PERSONNEL RECORDS	Non-compliance			

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:
Yolanda Wood-Valdez	52886	01/04/2017

Administrative Requirements

Deficiencies

The home does not have documentation of a background check within 5 years for care giver(s)

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: 02/04/2017

Date to be Completed: 02/04/2017	
8.16.2.32 F PERSONNEL HANDBOOK	Compliance
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	Compliance
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	Compliance
8.16.2.34 K SWIMMING, WADING AND WATER	Compliance
8.16.2.34 L FIELD TRIPS	Compliance
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	Compliance
Health & Safety Requirements	
8.16.2.36 A HYGIENE	Compliance
8.16.2.36 B FIRST AID REQUIREMENTS	Compliance
8.16.2.36 C MEDICATION	Compliance
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES	Compliance
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES	Compliance

Survey Report Form Page 2 of 3

Center Name:	License Number:	Date:	
Yolanda Wood-Valdez	52886	01/04/2017	
Buildings	, Grounds & Safety		
8.16.2.38 A HOUSEKEEPING			Compliance
8.16.2.38 B PEST CONTROL			Compliance
8.16.2.38 C MECHANICAL SYSTEMS			Non-compliance
<u>Deficiencies</u>			
Water coming from a faucet was not below 110 degrees (Fahr	enheit).		
Regulation: 8.16.2.38C(5)			
Corrective Action Plan			
The home will ensure water coming from faucets is below 110	degrees (Fahrenheit) by		
installing a tempering valve ahead of all domestic water-heate			
Date to be Completed: 01/04/2017			
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL			Compliance
8.16.2.38 E EXITS			Compliance
8.16.2.38 F TOILET AND BATHING FACILITIES			Compliance
8.16.2.38 G SAFETY COMPLIANCE			Compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEG	GAL DRUGS AND CONTROLLED SUBST	ANCES	Compliance
8.16.2.38 PETS			Compliance
		!	

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.

01/04/2017

01/04/2017

Date

Surveyor:Dion Ortega Date Facility Rep:Yolanda Wood-Valdez

on 2:38 pm