

Center Name:					Phone:				
ABC Preschool - Sage				801 98TH Street SW Albuquerque, NM 87121			(505)839-4	4300	
License Number:	Issue Date:	Expiration I	Date:	ate: Type: Status:			•		
147680	09/1/2017	04/18/2018		3 Star FOCUS Child Care Center Licensed					
Capacity			•	-		Cer	nsus		
Over Age 2: 143	Under Age 2:	28 Night	Care:	0 Pl	ayground: 121	Ove	er 2: 4	4 Un	der 2: 12
Days and Hours of	Operation					-			
	<u>Monday</u>	<u>Tuesda</u>	<u>y</u> <u>W</u>	<u>ednesday</u>	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times	06:00 AM	06:00 AI	И (06:00 AM	06:00 AM	06:0	0 AM	06:00 AM	Closed
Closing Times	01:00 AM	01:00 AI	И (01:00 AM	01:00 AM	01:0	0 AM	01:00 AM	
# of Classrooms:	F	Purpose:			Date:		Т	ime:	
9	A	Annual			02/08/2018		1	0:00 AM	
Comments									

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:			
Licensure			
8.16.2.11 A TYPES OF LICENSES	Not Inspected		
8.16.2.11 B RENEWAL OF LICENSE	Not Inspected		
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	Not Inspected		
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	Not Inspected		
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Not Inspected		
8.16.2.18 D COMPLAINTS	Not Inspected		
8.16.2.21 A LICENSING REQUIREMENTS	Not Inspected		
8.16.2.21 B CAPACITY OF CENTERS Deficiencies The center failed to post classroom capacities, and ratios and group sizes in an area of the room that is easily visible to parents, staff and visitors. Regulation: 8.16.2.21B(3)(c) Corrective Action Plan The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors. Date to be Completed: 03/08/2018	Non-compliance		
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected		
Administrative Requirements			
8.16.2.22 A ADMINISTRATION RECORDS	Non-compliance		

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Administrative Requirements

Deficiencies

The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent licensing survey; current child care regulations.

Regulation: 8.16.2.22A

Corrective Action Plan

The center will post the missing item.

Date to be Completed: 03/08/2018

8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.22 C POLICY AND PROCEDURES	Compliance
8.16.2.22 D FAMILY HANDBOOK	Compliance

8.16.2.22 E CHILDREN'S RECORDS

Non-compliance

Deficiencies

Of the 20 children's records reviewed, 5 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.22 form for the child(ren) with no immunization/exemption.

Regulation: 8.16.2.22E(1)(e)

Corrective Action Plan

Parents will be advised to submit a complete and up-to-date immunization record or exemption. The center will review all children's records to ensure complete information is on file.

Date to be Completed: 03/08/2018

Deficiencies

Of the 20 children's records reviewed, 1 is/are missing a signed parent or guardian acknowledgement that the parent handbook had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

Regulation: 8.16.2.22E(1)(I)

Corrective Action Plan

Parents will be advised to complete the statement. The center will review all children's records to ensure a signed acknowledgement is on file.

Date to be Completed: 03/08/2018

Deficiencies

Of the 20 children's records reviewed, 1 is/are missing information on allergies or medical conditions. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Regulation: 8.16.2.22E(2)(a)

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all records to ensure information regarding allergies and medical conditions is on file.

Date to be Completed: 03/08/2018

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Administrative Requirements

Deficiencies

Of the 20 children's records reviewed, 1 is/are missing a document giving the center permission to transport the child in a medical emergency and authorization for medical treatment signed by a parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Regulation: 8.16.2.22E(2)(d)

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure emergency medical transportation and treatment authorization is on file.

Date to be Completed: 03/08/2018

8.16.2.22 F PERSONNEL RECORDS

IO.E.EE I I EROOMMEE REGORDO

From the review of staff records, it was determined that 4 out of 22 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.

Regulation: 8.16.2.22F(1)(P)

Corrective Action Plan

The center will have staff complete the required acknowledgement and will retain on file.

Date to be Completed: 03/08/2018

Deficiencies

Deficiencies

From the review of staff records, it was determined that 1 out of 22 staff records does/do not include the staff's position. See Staff Records 8.16.2.22 form for staff with this missing information.

Regulation: 8.16.2.22F(1)(b)

Corrective Action Plan

The center will add the position to the record.

Date to be Completed: 03/08/2018

Deficiencies

From the review of staff records, it was determined that 1 out of 22 staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.22 form for staff with this missing information.

Regulation: 8.16.2.22F(1)(c)

Corrective Action Plan

The center will add staff's current and past duties and responsibilities to the record.

Date to be Completed: 03/08/2018

Deficiencies

From the review of staff records, it was determined that 10 out of 22 staff records does/do not include documentation of current first-aid and cardiopulmonary resuscitation training. See Staff Records 8.16.2.22 form for staff without verification of training.

Regulation: 8.16.2.22F(1)(g)

Corrective Action Plan

The center will obtain documentation of first-aid and CPR training and retain on file.

Date to be Completed: 03/15/2018

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Non-compliance

Administrative Requirements

Deficiencies

From the review of staff records, it was determined that 12 out of 22 staff records does/do not include a professional development plan based on seven areas of competency. See Staff Records 8.16.2.22 form for staff who need a current plan.

Regulation: 8.16.2.22F(1)(n)

Corrective Action Plan

The center will have staff complete a professional development plan and sign the plan . The plan will be maintained on file.

Date to be Completed: 03/08/2018

Deficiencies

From the review of staff records, it was determined that 1out of 22 staff records does/do not include signed acknowledgement that the personnel handbook had been read and understood. See Staff Records 8.16.2.22 form for staff who need to complete the acknowledgement.

Regulation: 8.16.2.22F(1)(o)

Corrective Action Plan

The center will have staff complete the required acknowledgement and will retain on file.

Date to be Completed: 03/08/2018

Deficiencies

From the review of staff records, it was determined that 1 out of 22 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.22 form for staff with missing documentation.

Regulation: 8.16.2.22F(1)(h)

Corrective Action Plan

The center will obtain verification of all training and retain on file.

Date to be Completed: 03/08/2018

8.16.2.22 G PERSONNEL HANDBOOK	Compliance		
Personnel & Staffing			
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance		
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING	Non-compliance		
<u>Deficiencies</u>			
Educators did not complete the following training within 3-months: Health and Safety Training			
Regulation: 8.16.2.23B(2)(b)			
Corrective Action Plan			
All educators, regardless of the number of hours per week, will complete the above listed training.			
The following staff members need to complete the required training:			
Date to be Completed: 03/08/2018			

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Center Name:	License Number:	Date:
ABC Preschool - Sage	147680	02/08/2018

Personnel & Staffing

Deficiencies

From the review of staff records, it was determined that 4 out of 22 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation.

Regulation: 8.16.2.23B(2)(a)

Corrective Action Plan

Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children.

Date to be Completed: 03/08/2018

Deficiencies

From the review of staff records, it was determined that 7 out of 22 staff does/do not have documentation of the 45-hour entry level course or an approved equivalent prior to or within six months of employment.

Regulation: 8.16.2.23B(2)(c)

Corrective Action Plan

Training will be completed for staff as required and documentation retained on file.

Date to be Completed: 03/08/2018

Deficiencies

From the review of staff records, it was determined that 3 out of 22 staff working more than 20 hours a week, has/have no documentation of at least 24 hours of qualified annual training, See Staff Records 8.16.2.22 form for staff with missing documentation of training.

Regulation: 8.16.2.23B(2)(d)

Corrective Action Plan

Annual training will be completed as required and documentation retained on file.

Date to be Completed: 03/08/2018

Deficiencies

It was observed that 1 out of 3 infant and toddler care givers failed to complete at least four hours of training in infant and toddler care annually or within six months of starting work.

Regulation: 8.16.2.23B(2)(k)

Corrective Action Plan

Training in infant and toddler care will be obtained for care givers as required; training will be documented and retained on

file.

Date to be Completed: 03/08/2018

8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZE	S	Compliance
	Services & Care of Children	
8.16.2.24 A GUIDANCE		Non-compliance

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Services & Care of Children

Deficiencies

Of the 22 staff's records reviewed, 8 is/are missing a signed staff acknowledgement that the center's guidance policy had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

Regulation: 8.16.2.24A(1)

Corrective Action Plan

The center will review all staff's records to ensure a signed staff acknowledgement is on file.

Date to be Completed: 03/08/2018

Deficiencies

Of the 20 children's records reviewed, 1 is/are missing a signed parent or guardian acknowledgement that the center's guidance policy had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

Regulation: 8.16.2.24A(1)

Corrective Action Plan

The center will review all children's records to ensure a signed parent or guardian acknowledgement is on file.

Date to be Completed: 03/08/2018

Date to be Completed: 03/06/2016	
8.16.2.24 B NAPS OR REST PERIOD	Compliance
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	Compliance
8.16.2.24 D DIAPERING AND TOILETING	Compliance
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	N/A
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE	N/A
8.16.2.24 G PHYSICAL ENVIRONMENT	Compliance
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Compliance
8.16.2.24 I EQUIPMENT AND PROGRAM	Non-compliance
<u>Deficiencies</u> Play equipment and materials in the Toddler - (12 - 24 mo.) class room/area are not accessible to children, including those with disabilities, as evidenced by large bins that	

Play equipment and materials in the Toddler - (12 - 24 mo.) class room/area are not accessible to children, including those with disabilities, as evidenced by large bins that contain a variety of play items that are too disorganized for children to select from. The toddler room has a home living area that has a dress up shelve that is disorganized and children are unable to view or access the dress up clothes.

Regulation: 8.16.2.24I(6)

Corrective Action Plan

Staff will be instructed to reorganize storage so children, including those with disabilities, can select and replace materials by themselves or with minimal assistance.

Date to be Completed: 03/08/2018

Deficiencies

The center did not post the daily activity schedule. In the young school age room and the infant room.

Regulation: 8.16.2.24I(8)

Corrective Action Plan

The center will begin posting their daily activities schedules and following them.

Date to be Completed: 03/08/2018

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Center Name:	License Number:	Date:
ABC Preschool - Sage	147680	02/08/2018

Services & Care of Children

Deficiencies

The center does not provide children in the yr. old class room(s) sufficient materials for indoor activities so that at any one time each child can be individually involved. The art shelve lacks material.

Regulation: 8.16.2.24I(4)

Corrective Action Plan

Additional materials will be obtained.

Date to be Completed: 03/08/2018

I6.2.24 K SWIMMING, WADING AND WATER I6.2.24 L FIELD TRIPS Food Service I6.2.25 B MEALS AND SNACKS I6.2.25 C MENUS Deficiencies The posted menu was not followed and the substitution(s) was not recorded on the posted menu. The menu provided was incomplete as evidenced by missing fruit vegetable , and milk Regulation: 8.16.2.25C(2) Corrective Action Plan When the posted menu is not followed, substitutions will meet nutritional requirements and be recorded on the posted menu. Date to be Completed: 03/08/2018	N/ N/ Compliand Non-compliand
Food Service 16.2.25 B MEALS AND SNACKS 16.2.25 C MENUS Deficiencies The posted menu was not followed and the substitution(s) was not recorded on the posted menu. The menu provided was incomplete as evidenced by missing fruit vegetable, and milk Regulation: 8.16.2.25C(2) Corrective Action Plan When the posted menu is not followed, substitutions will meet nutritional requirements and the recorded on the posted menu. Date to be Completed: 03/08/2018	Complianc
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Date to be Completed: 03/08/2018	
Date to be Completed: 03/08/2018	
16.2.25 D KITCHENS	Non-compliand
<u>Deficiencies</u>	
The bottles of infant formula or breast milk brought from home for children in the Infant - (6	
wk 12 mo.); 2 yr. old classroom(s) are not labeled; refrigerated.	
Regulation: 8.16.2.25D(5)	
Corrective Action Plan	
A staff will be assigned responsibility for ensuring all foods and bottles brought from the	
child's home are labeled and , if necessary, refrigerated.	
Date to be Completed: 03/08/2018	
16.2.25 E MEAL TIMES	Compliand
Health & Safety Requirements	
16.2.26 A HYGIENE	Compliand
16.2.26 B FIRST AID REQUIREMENTS	Compliano
16.2.26 B FIRST AID REQUIREMENTS 16.2.26 C MEDICATION	Compliand
	· · · · · ·

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Health & Safety Requirements

Deficiencies

A vehicle used for transporting children is not equipped with an operable fire extinguisher. Fire extinguisher is not tagged with inspection date.

Regulation: 8.16.2.28A

Corrective Action Plan

The vehicle will be equipped with required items.

Date to be Completed: 03/08/2018

Buildings, Grounds & Safety

8.16.2.29 A HOUSEKEEPING Non-compliance

Deficiencies

The ceiling tiles in the Pre-K , Infants, Twos clasrooms are not clean as evidenced by water stains.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 03/08/2018

Deficiencies

The Equipment are not in good repair as evidenced by area rug in the infant room is unraveling.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 03/08/2018

Deficiencies

The premises in the toddler room are not safe in that the evacuation crib is used for storage.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed.

Date to be Completed: 03/08/2018

Deficiencies

The Equipment are not in good repair as evidenced by the knobs are missing from the play stovein the toddler room.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 03/08/2018

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Buildings, Grounds & Safety

Deficiencies

The toys in the Twos nd threes classroom are not clean as evidenced by dolls and soft toys are unclean.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 03/08/2018

Deficiencies

The premises in the classrooms are not clean as evidenced by area rugs are unclean.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 03/08/2018

Deficiencies

The Fixtures are not in good repair as evidenced by sink in the twos and threes bathroom is

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 03/08/2018

Deficiencies

The premises in the school age classrooms are not clean as evidenced by walls and doors are unclean.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 03/08/2018

Deficiencies

The Equipment are not in good repair as evidenced by the play refrigerator in the school age room is missing a handle.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 03/08/2018

Deficiencies

The Equipment are not in good repair as evidenced by there is a broken sand table, and the basket ball goal is missing a net on the twos and threes playground.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 03/08/2018

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Center Name:	License Number:	Date:	
ABC Preschool - Sage	147680	02/08/2018	
Buildings, Ground	ls & Safety		
8.16.2.29 B PEST CONTROL			Compliance
8.16.2.29 C MECHANICAL SYSTEMS			Non-compliance
<u>Deficiencies</u>			
A door used for ventilation in the Pre K does not have a screen .			
Regulation: 8.16.2.29C(4)			
Corrective Action Plan			
Windows and doors used for ventilation will be properly screened. Date to be Completed: 03/08/2018			
·			
8.16.2.29 D WATER AND WASTE			Compliance
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL			Compliance
8.16.2.29 F EXITS AND WINDOWS			Compliance
8.16.2.29 G TOILET AND BATHING FACILITIES			Compliance
8.16.2.29 H SAFETY COMPLIANCE			Non-compliance
<u>Deficiencies</u> The center failed to conduct an emergency preparedness practice drills	for at least once a		
quarter.	for at least office a		
Regulation: 8.16.2.29H(1)			
Corrective Action Plan			
A center will conduct emergency preparedness practice drills at least qu	arterly beginning		
January of each calendar year. Date to be Completed: 03/08/2018			
<u>Deficiencies</u>			
The center failed to conduct a fire drill for the month(s) of January.			
Regulation: 8.16.2.29H(2)			
Corrective Action Plan			
A monthly fire drill will be held and recorded.			
Date to be Completed: 03/08/2018			
<u>Deficiencies</u>			
An evacuation plan is not posted in the Infant - (6 wk 12 mo.); Toddler	r - (12 - 24 mo.); 3 yr.		
old class room(s) used by children. Regulation: 8.16.2.29H(3)(f)			
Corrective Action Plan An evacuation plan will be posted in each room used by children.			
Date to be Completed: 03/08/2018			
<u>Deficiencies</u>			
The center's fire extinguisher is not inspected yearly. In the school age	classroom.		
Regulation: 8.16.2.29H(3)(k)			
Corrective Action Plan			
Equipment will be maintained and inspected yearly.			
Date to be Completed: 03/08/2018			
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	AND CONTROLLED SUBS	STANCES	Compliance
8.16.2.29 J 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.

02/08/2018

02/08/2018

Surveyor:Lucille Mizner

Date

Facility Rep:Veronica Martinez

Date
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