

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

| Center Name: | | | Address: | | - | | | P | hone: | |
|--|---------------|----------------------|---|----------|----------------------|-----|--------------|----------------|---------------|------------|
| FUMC Parents Morning Out | | | 1800 Red Rock Drive Gallup, NM 87301 | | | | | (! | (505)593-3887 | |
| License Number: | Issue Date: | Expiration [| Date: Typ | e: | | | Status: | | | |
| 127449 | 02/22/2017 | 02/21/2018 | 2 St | ar Child | Care Center | | Licensed | | | |
| Capacity | | | | | | Ce | nsus | | | |
| Over Age 2: 12 | Under Age 2: | 0 Night | Care: 0 | Pla | ayground: 12 | Ove | er 2: | 8 | Unde | r 2: 0 |
| Days and Hours of | Operation | | | | | • | | | | |
| On a min or Time of | Monday | Tuesda | - | - | Thursday | | day | | <u>urday</u> | Sunday |
| Opening Times Closing Times | | 09:00 AN 12:00 PN | | | 09:00 AM 12:00 PM | | 0 PM 0 PM | Ci | osed | Closed |
| # of Classrooms: | | Purpose: | | | Date: | | | Time: | | |
| 1 | | Annual | | | 12/06/2017 | | | 11:15 A | AM | |
| Comments | | | | | | | | | | |
| A SUR | | LITY HAS BEEN MA | | | O OF NON-COMPLIA | | | | | |
| | | | | | | | | | | |
| | | | | Licen | sure | | | | I | 0 |
| 8.16.2.11 A TYPES OF LICENSES | | | | | | | | Compliance | | |
| 8.16.2.11 B RENEWAL OF LICENSE | | | | | | | Compliance | | | |
| 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 | | | | | | | Compliance | | | |
| 8.16.2.18 D COMPLAINTS | | | | | | | N/A | | | |
| 8.16.2.21 A LICENS | | | | | | | | | | Compliance |
| | | | | | | | Compliance | | | |
| 8.16.2.21 C INCIDENT REPORTING REQUIREMENTS N/A | | | | | | | | N/A | | |
| | | | Administr | ative | Requirements | 5 | | | | |
| 8.16.2.22 A ADMIN | STRATION RECO | ORDS | | | | | | | | Compliance |
| 8.16.2.22 B MISSIO | N, PHILOSOPHY | AND CURRICUL | UM STATEMEN | Г | | | | | | Compliance |
| 8.16.2.22 C POLICY | AND PROCEDU | IRES | | | | | | | | Compliance |
| 8.16.2.22 D FAMILY | HANDBOOK | | | | | | | | | Compliance |
| 8.16.2.22 E CHILDREN'S RECORDS | | | | | | | Compliance | | | |
| 8.16.2.22 F PERSONNEL RECORDS | | | | | | | Compliance | | | |
| 8.16.2.22 G PERSC | NNEL HANDBO | ок | | | | | | | | Compliance |
| Personnel & Staffing | | | | | | | | | | |
| 8.16.2.23 A PERSO | NNEL AND STAF | FING REQUIREN | MENTS | | | | | | | Compliance |
| 8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING | | | | | | | | Non-compliance | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

| Center Name: FUMC Parents Morning Out | License Number: 127449 | Date: |
|--|---|-------------|
| | | 12/06/2017 |
| | Personnel & Staffing | |
| Deficiencies Educators did not complete the following training wi resuscitation (CPR) certification; Health and Safety Regulation: 8.16.2.23B(2)(b) | | |
| Corrective Action Plan All educators, regardless of the number of hours pe | er week, will complete the above listed training. | |
| The following staff members need to complete the r Date to be Completed: 01/08/2018 | required training: | |
| 8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZE | ES | Compliance |
| | Services & Care of Children | |
| 8.16.2.24 A GUIDANCE | | Compliance |
| 8.16.2.24 B NAPS OR REST PERIOD | | N/A |
| 8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INF | ANTS AND TODDLERS | N/A |
| 8.16.2.24 D DIAPERING AND TOILETING | | Compliance |
| 8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHI | Compliance | |
| 8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIG | HT CARE | N/A |
| 8.16.2.24 G PHYSICAL ENVIRONMENT | Compliance | |
| 8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENV | Compliance | |
| 8.16.2.24 I EQUIPMENT AND PROGRAM | Compliance | |
| 8.16.2.24 J OUTDOOR PLAY AREAS | Compliance | |
| 8.16.2.24 K SWIMMING, WADING AND WATER | N/A | |
| 8.16.2.24 L FIELD TRIPS | | N/A |
| | Food Service | |
| 8.16.2.25 B MEALS AND SNACKS | | Compliance |
| 8.16.2.25 C MENUS | Compliance | |
| 8.16.2.25 D KITCHENS | Compliance | |
| 8.16.2.25 E MEAL TIMES | Compliance | |
| | Health & Safety Requirements | |
| 8.16.2.26 A HYGIENE | | Compliance |
| 8.16.2.26 B FIRST AID REQUIREMENTS | Compliance | |
| 8.16.2.26 C MEDICATION | | N/A |
| 8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENT | Compliance | |
| 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 | | Compliance |
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|--|---------------------------------|---------------------|------------|--|--|--|--|
| Buildings, Grounds & Safety | | | | | | | |
| 8.16.2.29 C MECHANICAL SYSTEMS | | | Compliance | | | | |
| 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 | | | Compliance | | | | |
| 8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLE | GAL DRUGS AND CONTROLLED SUBSTA | NCES | Compliance | | | | |
| 8.16.2.29 J PETS | | | N/A | | | | |
| | | | | | | | |

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.

MAR PM

12/06/2017

Date

Facility Rep:Elizabeth Kleenberger

12/06/2017

Surveyor:Peggy Waconda
Survey Report Form

Date