

Center Name: Grads Child Development Center		Address: 325 Marguerite St Gallup, NM 87301			Phone: (505)721-2408		
License Number: 74435	Issue Date: 05/1/2017	Expiration Date: 10/8/2017	Type: 2 Star + Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	6	Under Age 2:	12	Night Care:	0	Playground:	25
		Over 2:	0	Under 2:	6		
Days and Hours of Operation							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	07:30 AM	07:30 AM	07:30 AM	07:30 AM	07:30 AM	Closed	Closed
Closing Times:	04:30 PM	04:30 PM	04:30 PM	04:30 PM	04:30 AM		
# of Classrooms: 2	Purpose: Annual		Date: 08/31/2017		Time: 12:10 PM		
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	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 LICENSING REQUIREMENTS	Compliance
8.16.2.21 B CAPACITY OF CENTERS	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	N/A
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
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

Center Name: Grads Child Development Center	License Number: 74435	Date: 08/31/2017
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Administrative Requirements

Deficiencies

Of the 4 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: 10/02/2017

Deficiencies

Of the 4 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)(l)

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: 10/02/2017

8.16.2.22 F PERSONNEL RECORDS	Non-compliance
<p><u>Deficiencies</u></p> <p>The center failed to have 4 out of 4 person(s) providing care to sign an annual statement that they have, or have never had, an arrest or substantiated referral to a child protective services agency. See Staff Records 8.16.2.22 form for staff with this missing information.</p> <p>Regulation: 8.16.2.22F(1)(f)</p> <p><u>Corrective Action Plan</u></p> <p>The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction.</p> <p>Date to be Completed: 08/31/2017</p> <p><u>Deficiencies</u></p> <p>From the review of staff records, it was determined that 1 out of 4 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information. Note: Clearance needs updating.</p> <p>Regulation: 8.16.2.22F(1)(e)</p> <p><u>Corrective Action Plan</u></p> <p>The center will obtain documentation of a background check.</p> <p>Date to be Completed: 09/06/2017</p>	

8.16.2.22 G PERSONNEL HANDBOOK	Compliance
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Personnel & Staffing

8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING	Compliance
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Non-compliance

Center Name: Grads Child Development Center	License Number: 74435	Date: 08/31/2017
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Personnel & Staffing

Deficiencies

The center failed to post the capacity for each activity/interest area. 1 out of 2 classrooms failed to post the capacity for each activity/interest area.

Regulation: 8.16.2.23 C (2)(b)

Corrective Action Plan

Each activity/interest area will have a posted capacity, which may vary according to the activity and size of the space, and will not exceed the group size requirement as specified in Paragraph (1) of Subsection C of 8.16.2.23 NMAC

Date to be Completed: 10/02/2017

Services & Care of Children

8.16.2.24 A GUIDANCE	Compliance
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	Compliance
8.16.2.24 J OUTDOOR PLAY AREAS <u>Deficiencies</u> The playground equipment isn't inspected weekly. Regulation: 8.16.2.24J(4) <u>Corrective Action Plan</u> The facility will hold weekly inspections of their playground equipment. Date to be Completed: 10/02/2017	Non-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 CENTERS	Compliance

Center Name: Grads Child Development Center	License Number: 74435	Date: 08/31/2017
Health & Safety Requirements		
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS		N/A
Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING		Non-compliance
<p><u>Deficiencies</u> The Equipment are not in good repair as evidenced by diapering table/built in sink has a crack. Wooden outdoor canopy is dry and has splinters. Toddlers bathroom and storage room. had water damage and is being repaired. Bathroom edging also missing. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> Repairs will be completed and a system for routine inspection of the center and premises will be established. Date to be Completed: 10/02/2017</p>		
8.16.2.29 B PEST CONTROL		Compliance
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		Non-compliance
<p><u>Deficiencies</u> The center does not have emergency lighting that turns on automatically when electrical service is disrupted. Note : Did not come on when tested. Regulation: 8.16.2.29E(2)</p> <p><u>Corrective Action Plan</u> Emergency lighting will be installed. Date to be Completed: 10/02/2017</p>		
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
<p><u>Deficiencies</u> The center does not have verification of an annual fire inspection from the fire authority having jurisdiction. Regulation: 8.16.2.29H(3)(e)</p> <p><u>Corrective Action Plan</u> An annual fire inspection will be requested from the fire authority having jurisdiction over the center. Date to be Completed: 10/02/2017</p> <p><u>Deficiencies</u> The center failed to conduct a fire drill for the month(s) of April; May. Regulation: 8.16.2.29H(2)</p> <p><u>Corrective Action Plan</u> A monthly fire drill will be held and recorded. Date to be Completed: 08/31/2017</p>		
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance

Center Name: Grads Child Development Center	License Number: 74435	Date: 08/31/2017
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Buildings, Grounds & Safety

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.

	
08/31/2017	08/31/2017

Surveyor: Peggy Waconda	Date	Facility Rep: Tomi Jaramillo	Date
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