



Facility

Name: *Happy Days Christian Day Care and Preschool Inc.*

License Number: *10517*

Address: *2001 Golf Course Rd, Rio Rancho, NM 87124*

Phone: *5058926529*

Fax:

E-mail: *bill@hdcps.org; pebbles@hdcps.org*

License Information

Type: *3 Star FOCUS Child
Care Center*

Status: *Licensed*

Issue Date: *12/11/2018*

Expiration Date:
12/10/2019

Capacity

Over Age 2: *60*

Under Age 2: *29*

Night Care:

Playground: *89*

Square Footage: *0*

Census

Over 2: *45*

Under 2: *24*

Classrooms

Number of Classrooms: *8*

Days and Hours of Operation

Monday

6:00 AM - 6:30 PM

Tuesday

6:00 AM - 6:30 PM

Wednesday

6:00 AM - 6:30 PM

Thursday

6:00 AM - 6:30 PM

Friday

6:00 AM - 6:30 PM

Saturday

Closed

Sunday

Closed

Inspection

Date: *04/24/2019*

Time In: *8:50 AM*

Time Out: *12:04 PM*

Purpose: *Semi-annual*

Licensing:

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

Licensing Actions and Administrative Appeals:

8.16.2.12 A, K, M Licensing Actions and Administrative Appeals

Not Inspected

Surveys for Child Care Facilities:

8.16.2.17 E, F Surveys for Child Care Facilities

Compliance

Complaints:

8.16.2.18 D Complaints

Not Inspected

Licensure Requirements for Centers:

8.16.2.21 A Licensing Requirements

Not Inspected

8.16.2.21 B Capacity of Centers

Compliance

8.16.2.21 B (3)c Capacity of Centers

Compliance

8.16.2.21 C Incident Reporting Requirements

Not Inspected

Administrative Requirements for Centers:

8.16.2.22 A Administrative Records

Compliance

8.16.2.22 B Mission, Philosophy and Curriculum Statement

Not Inspected

8.16.2.22 C Policy and Procedures

Compliance

8.16.2.22 D Family Handbook

Not Inspected

8.16.2.22 E Children's Records

Non-compliance**Admin/Licensure**

8.16.2.22.E.1.e.:a copy of the child's up-to-date immunization record or a public health division approved exemption from the requirement, a grace period of a maximum of 30 days will be granted for children in foster care or homeless children and youth;

Finding**Deadline: 05/24/2019**

Of the 8 children's records reviewed, 3 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.

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.

8.16.2.22.E.2.d.:A document giving a center permission to transport the child in a medical emergency and an authorization for medical treatment signed by a parent or guardian.

Admin/Licensure (continued)

Finding

Deadline: 05/24/2019

Of the 8 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.

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.

8.16.2.22.E.1.c.:*a list of people authorized to pick up the child and an authorization form signed by parent or guardian; identification of person authorized by the parent or guardian to pick up the child shall be verified at pick up;*

Finding

Deadline: 05/24/2019

Of the 8 children's records reviewed, 2 is/are missing a list of people authorized to pick up the child and an authorization form signed by the parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

Corrective Action Plan

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

8.16.2.22 F Personnel Records

Non-compliance

Personnel

8.16.2.22.F.1.b.:*position;*

Finding

Deadline: 05/24/2019

From the review of staff records, it was determined that 2 out of 13 staff records does/do not include the staff's position. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will add the position to the record.

8.16.2.22.F.1.c.:*current and past duties and responsibilities;*

Personnel (continued)

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 2 out of 13 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.

Corrective Action Plan

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

8.16.2.22.F.1.h.:documentation of all appropriate training by date, time, hours and area of competency;

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 2 out of 13 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.

Corrective Action Plan

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

8.16.2.22.F.1.i.:emergency contact number;

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 1 out of 13 staff records does/do not include an emergency contact number. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will have staff complete required information.

8.16.2.22.F.1.j.:universal precaution acknowledgment form;

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 2 out of 13 staff records does/do not include a signed universal precaution acknowledgement form. See Staff Records 8.16.2.22 form for staff with missing documentation.

Corrective Action Plan

The center will have staff complete and sign the universal precaution acknowledgement form and will retain on file.

8.16.2.22.F.1.k.:confidentiality form;

Personnel (continued)

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 2 out of 13 staff records does/do not include a signed confidentiality form. See Staff Records 8.16.2.22 form for staff who need to complete a signed confidentiality form.

Corrective Action Plan

The center will have staff complete a signed confidentiality form and will retain on file.

8.16.2.22.F.1.n.: *written plan for ongoing professional development for each educator, including the director, that is based on the seven areas of competency, consistent with the career lattice, and based on the individual's goals; and*

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 5 out of 13 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.

Corrective Action Plan

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

8.16.2.22.F.1.o.: *signed acknowledgment that the staff have read and understand the personnel handbook;*

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 2 out of 13 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.

Corrective Action Plan

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

8.16.2.22.F.1.p.: *signed acknowledgement that all staff have reviewed and are aware of the center's disaster preparedness plan and evacuation plan.*

Finding**Deadline:** 05/24/2019

From the review of staff records, it was determined that 2 out of 13 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.

Corrective Action Plan

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

Personnel and Staffing Requirements for Centers: (continued)

8.16.2.22 G Personnel Handbook

Not Inspected

Personnel and Staffing Requirements for Centers:

8.16.2.23 A Personnel and Staffing Requirements

Compliance

8.16.2.23 B Staff Qualifications and Training

Non-compliance**Personnel**

8.16.2.23.B.2.b.: *All new educators regardless of the number of hours per week will complete the following training within three (3) months of their date of hire. All current educators will have three months to comply with the following training from the date these regulations are promulgated:*

Finding**Deadline: 05/24/2019**

Educators did not complete the following training within 3-months: Health and Safety Training 1 educator needs to complete Health & Safety Certificate.

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:

8.16.2.23.B.2.a.: *The director will develop and document an orientation and training plan for new staff members and volunteers and will provide information on training opportunities. The director will have on file a signed acknowledgment of completion of orientation by employees, volunteers and substitutes as well as the director. New staff members will participate in an orientation before working with children. Initial orientation will include training on the following:*

Finding**Deadline: 05/24/2019**

From the review of staff records, it was determined that 2 out of 13 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation.

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.

8.16.2.23 C Staff/Child Ratios and Group Sizes

Compliance

Services and Care of Children in Centers:

8.16.2.24 A Guidance

Compliance

8.16.2.24 A1 Guidance

Non-compliance**Admin/Licensure**

Admin/Licensure (*continued*)

8.16.2.24.A.1.: A center will have written policies and procedures clearly outlining guidance practices. Centers will give this information to all parents and staff who will sign a form to acknowledge that they have read and understand these policies and procedures.

Finding**Deadline:** 05/24/2019

Of the 13 staffs records reviewed, 2 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 staff who have this missing.

Corrective Action Plan

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

8.16.2.24 B Naps or Rest Period	Compliance
8.16.2.24 D Diapering and Toileting	Compliance
8.16.2.24 E Additional Requirements for Children with Special Needs	Compliance
8.16.2.24 F Additional Requirements for Night Care	N/A
8.16.2.24 G Physical Environment	Not Inspected
8.16.2.24 H Social-Emotional Responsive Environment	Compliance
8.16.2.24 I Equipment and Program	Non-compliance

Preschool Classroom

8.16.2.24.I.8.: A center will post a daily activity schedule. A center will follow a consistent pattern for routine activities such as meals, snacks and rest.

Finding**Deadline:** 05/24/2019

The center did not post the daily activity schedule.

Corrective Action Plan

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

8.16.2.24 J Outdoor Play Areas	Non-compliance
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Outdoor Play

8.16.2.24.J.3.: A center will place sufficient energy absorbing surfaces beneath climbing structures, swings, and slides (as determined by Subsection P of 8.16.2.8 NMAC).

Outdoor Play (*continued*)

Finding

Deadline: 05/24/2019

The fall zone underneath the slide is not adequate as evidenced by the resilient material is not deep enough over the fall zone area. There is a piece of concrete next to the slide fall zone.

Corrective Action Plan

An approved resilient surface will be provided beneath the climbing structures, swings, and slides.

8.16.2.24 K Swimming, Wading and Water	Not Inspected
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8.16.2.24 L Field Trips	Not Inspected
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Food Service Requirements for Centers:

8.16.2.25 B3 Meals and Snacks	Compliance
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8.16.2.25 C Menus	Compliance
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8.16.2.25 E Meal Times	Compliance
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Health and Safety Requirements for Centers:

8.16.2.26 A Hygiene	Compliance
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8.16.2.26 B First Aid Requirements	Not Inspected
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8.16.2.26 C Medication	Not Inspected
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Illness Requirements for Centers:

8.16.2.27 A-D Illness Requirements for Centers	Compliance
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Transportation Requirements for Centers:

8.16.2.28 A-H Transportation Requirements for Centers	N/A
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Building, Ground and Safety Requirements for Centers:

8.16.2.29 A Housekeeping	Non-compliance
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2 Year Old Classroom

8.16.2.29.A.1.:A center will keep the premises, including furniture, fixtures, floors, drinking fountains, toys and equipment clean, safe, and in good repair. The center and premises will be free of debris and potential hazards.

2 Year Old Classroom (continued)

Finding

Deadline: 04/24/2019

The premises in the restroom are not safe in that disinfectant was left on the toilet lid. Corrected on site. Disinfectant was removed.

Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed. Corrected on site. Disinfectant was removed

Preschool Classroom

8.16.2.29.A.1.:*A center will keep the premises, including furniture, fixtures, floors, drinking fountains, toys and equipment clean, safe, and in good repair. The center and premises will be free of debris and potential hazards.*

Finding

Deadline: 04/24/2019

The premises in the classroom are not safe in that purses accessible to the children. Corrected on site purses were moved and placed inside a closet.

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Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed. Corrected on site, purses were moved and placed in a closet.

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	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

Admin/Licensure

8.16.2.29.H.1.:*A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year.*

Admin/Licensure (continued)

Finding

Deadline: 05/24/2019

The center failed to conduct an emergency preparedness practice drills for at least once a quarter.

Corrective Action Plan

A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year.

8.16.2.29 H3(f)(i)(k) Safety Compliance

Compliance

8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

Compliance

8.16.2.29 J Pets

N/A

Additional Comments

None

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: Kia Kennedy



Facility Representative: Quenna Pebbles Sparks