

Center Name: Los Solecitos Academy		Address: 2700 Isleta Blvd SW Albuquerque, NM 87105			Phone: (505)873-6090		
License Number: 160899	Issue Date: 09/29/2017	Expiration Date: 08/31/2018	Type: 2 Star + Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	52	Under Age 2:	14	Night Care:	0	Playground:	40
		Over 2:	32	Under 2:	13		
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:	06:30 AM	06:30 AM	06:30 AM	06:30 AM	06:30 AM	Closed	Closed
Closing Times:	06:30 PM	06:30 PM	06:30 PM	06:30 PM	06:30 PM		
# of Classrooms: 6	Purpose: Semi-Annual		Date: 02/12/2018		Time: 10:00 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	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.22 A ADMINISTRATION 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	Compliance
8.16.2.22 E CHILDREN'S RECORDS	Non-compliance

Center Name: Los Solecitos Academy	License Number: 160899	Date: 02/12/2018
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Administrative Requirements

Deficiencies

Of the 6 children's records reviewed, 2 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: 03/12/2018

8.16.2.22 F PERSONNEL RECORDS

Non-compliance

Deficiencies

From the review of staff records, it was determined that 1 out of 2 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: 03/13/2018

Deficiencies

From the review of staff records, it was determined that 1 out of 2 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: 03/13/2018

Deficiencies

From the review of staff records, it was determined that 1 out of 2 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: 03/13/2018

Deficiencies

From the review of staff records, it was determined that 2 out of 2 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: 03/13/2018

Center Name: Los Solecitos Academy	License Number: 160899	Date: 02/12/2018
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Administrative Requirements

Deficiencies

From the review of staff records, it was determined that 2 out of 2 staff records does/do not include an emergency contact number. See Staff Records 8.16.2.22 form for staff with this missing information.

Regulation: 8.16.2.22F(1)(i)

Corrective Action Plan

The center will have staff complete required information.

Date to be Completed: 03/06/2018

Deficiencies

From the review of staff records, it was determined that 1 out of 2 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: 03/12/2018

Deficiencies

From the review of staff records, it was determined that 1 out of 2 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: 03/12/2018

8.16.2.22 G PERSONNEL HANDBOOK	Compliance
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Personnel & Staffing

8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
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<p>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</p> <p><u>Deficiencies</u></p> <p>From the review of staff records, it was determined that 1 out of 2 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation.</p> <p>Regulation: 8.16.2.23B(2)(a)</p> <p><u>Corrective Action Plan</u></p> <p>Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children.</p> <p>Date to be Completed: 03/12/2018</p>	Non-compliance
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Center Name: Los Solecitos Academy	License Number: 160899	Date: 02/12/2018
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Personnel & Staffing

Deficiencies

The center failed to keep a training log on file with Employee's name; Date of hire; Position; Date of training; Clock hours; Competency area; Source of training; Training certificate for 2 out of 2 staff. See Staff Records 8.16.2.22 form for staff who are missing a complete training log.

Regulation: 8.16.2.23B(2)(l)

Corrective Action Plan

A training log will be completed for each staff that includes the employee 's name, date of hire, and position, date of training, clock hours, competency area, source of training, and training certificate.

Date to be Completed: 03/12/2018

8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Compliance
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	Not Inspected
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE	Not Inspected
8.16.2.24 G PHYSICAL ENVIRONMENT	Compliance
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Not Inspected
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	Not Inspected
8.16.2.24 L FIELD TRIPS	Not Inspected
Food Service	
8.16.2.25 B MEALS AND SNACKS	Compliance
8.16.2.25 C MENUS	Compliance
8.16.2.25 D KITCHENS <u>Deficiencies</u> A food is not properly stored; the item is not labeled and dated. Chicken defrosting in hot water Regulation: 8.16.2.25D(4) <u>Corrective Action Plan</u> The person responsible for food service will be instructed in proper food storage. discarded while surveyor was still present Date to be Completed: 02/12/2018	Non-compliance
8.16.2.25 E MEAL TIMES	Compliance

Center Name: Los Solecitos Academy	License Number: 160899	Date: 02/12/2018
Health & Safety Requirements		
8.16.2.26 A HYGIENE		Compliance
8.16.2.26 B FIRST AID REQUIREMENTS <u>Deficiencies</u> The center does not have on duty all educators currently certified in first aid and cardiopulmonary resuscitation (CPR). two Regulation: 8.16.2.26B(1) <u>Corrective Action Plan</u> All educators must be certified in first aid and cardiopulmonary resuscitation (CPR). Date to be Completed: 03/12/2018		Non-compliance
8.16.2.26 C MEDICATION		Compliance
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		Not Inspected
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS <u>Deficiencies</u> A vehicle used for transporting children is not equipped with an operable fire extinguisher . two vans Regulation: 8.16.2.28A <u>Corrective Action Plan</u> The vehicle will be equipped with required items. Date to be Completed: 03/12/2018		Non-compliance
Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING <u>Deficiencies</u> The Premises are not in good repair as evidenced by wall chipping paint in bathroom and in green room. Regulation: 8.16.2.29A(1) <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: 03/13/2018		Non-compliance
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

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Buildings, Grounds & Safety

Deficiencies

The center's fire extinguishers is not inspected yearly; tagged with the date of inspection. In kitchen and in van # 031

Regulation: 8.16.2.29H(3)(k)

Corrective Action Plan

Equipment will be maintained and inspected yearly.

Date to be Completed: 03/12/2018

8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.29 J PETS	Not Inspected

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.

SF 1230

02/12/2018

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02/12/2018

Surveyor: Sylvia Foster	Date	Facility Rep: Karla Tena	Date
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