



Center Name: PMS Cuba Head Start			Address: 50 County Road 13 Cuba, NM 87013			Phone: (505)228-2209		
License Number: 110250	Issue Date: 08/28/2016	Expiration Date: 08/27/2017	Type: 5 Star FOCUS Child Care Center			Status: Licensed		
Capacity Over Age 2: 20 Under Age 2: 0 Night Care: 0 Playground: 20						Census Over 2: 7 Under 2: 0		
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:	09:00 AM	09:00 AM	09:00 AM	09:00 AM	09:00 AM	Closed	Closed	
Closing Times:	01:00 PM	01:00 PM	01:00 PM	01:00 PM	01:00 PM			
# of Classrooms: 1		Purpose: Annual		Date: 05/02/2017		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	Compliance
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 <u>Deficiencies</u> The center failed to display in a prominent place that is readily visible to parents, staff and visitors the current child care regulations; current list of notifiable diseases and communicable diseases published by the office of epidemiology of the New Mexico department of health. Regulation: 8.16.2.22A <u>Corrective Action Plan</u> The center will post the missing item. Date to be Completed: 06/02/2017	Non-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

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Administrative Requirements		
8.16.2.22 E CHILDREN'S RECORDS	Compliance	
8.16.2.22 F PERSONNEL RECORDS <u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 3 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) <u>Corrective Action Plan</u> 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: 06/02/2017 <u>Deficiencies</u> The center failed to have 1 out of 3 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. Corrected on site. Regulation: 8.16.2.22F(1)(f) <u>Corrective Action Plan</u> The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction. Corrected on site. Date to be Completed: 05/02/2017 <u>Deficiencies</u> From the review of staff records, it was determined that 3 out of 3staff records does/do not include a dated weekly work schedule that includes the time of arrival and departure and breaks and lunch. See Staff Records 8.16.2.22 form for staff who need to have a work schedule. Corrected on site. Regulation: 8.16.2.22F(2) <u>Corrective Action Plan</u> The center will add the work schedule and maintain dated weekly work schedules for the director, all staff, all care givers and volunteers. Corrected on site. Date to be Completed: 05/02/2017	Non-compliance	
8.16.2.22 G PERSONNEL HANDBOOK	Not Inspected	
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	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 INFANTS AND TODDLERS	N/A	
8.16.2.24 D DIAPERING AND TOILETING	Compliance	

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Services & Care of Children		
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Compliance	
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE	Compliance	
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	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	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	
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	
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 <u>Deficiencies</u> The center failed to conduct an emergency preparedness practice drills for at least once a quarter. Regulation: 8.16.2.29H(1) <u>Corrective Action Plan</u> A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year. Date to be Completed: 06/02/2017	Non-compliance	

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05/02/2017

Buildings, Grounds & Safety

Deficiencies

The center failed to conduct a fire drill for the month(s) of April.

Regulation: 8.16.2.29H(2)

Corrective Action Plan

A monthly fire drill will be held and recorded.

Date to be Completed: 06/02/2017

8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES

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.



05/02/2017



05/02/2017

Surveyor: Kia Kennedy

Date

Facility Rep: Jennifer Gonzales

Date