



<b>Center Name:</b> Peanut Butter&Jelly Family Svcs			<b>Address:</b> 255A Camino Del Pueblo Bernalillo, NM 87004			<b>Phone:</b> (505)867-2356		
<b>License Number:</b> 90433	<b>Issue Date:</b> 03/30/2017	<b>Expiration Date:</b> 12/16/2017	<b>Type:</b> 5 Star FOCUS Child Care Center			<b>Status:</b> Licensed		
<b>Capacity</b> Over Age 2: 34    Under Age 2: 10    Night Care: 0    Playground: 44						<b>Census</b> Over 2: 3    Under 2: 2		
<b>Days and Hours of Operation</b>								
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>	
Opening Times:	Closed	09:00 AM	09:00 AM	09:00 AM		Closed	Closed	
Closing Times:		01:00 PM	01:00 PM	01:00 PM				
<b># of Classrooms:</b> 2	<b>Purpose:</b> Annual			<b>Date:</b> 10/19/2017		<b>Time:</b> 09:30 AM		
<b>Comments</b>								

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	Compliance
<b>8.16.2.21 B CAPACITY OF CENTERS</b> <u>Deficiencies</u> The center failed to post classroom capacities, and ratios and group sizes in an area of the room that is easily visible to parents, staff and visitors. Group size needs to be posted in the Peanut room., <b>Regulation:</b> 8.16.2.21B(3)(c) <u>Corrective Action Plan</u> The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors. <b>Date to be Completed:</b> 11/19/2017	Non-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

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<b>Administrative Requirements</b>		
<b>8.16.2.22 E CHILDREN'S RECORDS</b>  <u><b>Deficiencies</b></u> Of the 11 children's records reviewed, 1 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.  <b>Regulation:</b> 8.16.2.22E(1)(e)  <u><b>Corrective Action Plan</b></u> 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.  <b>Date to be Completed:</b> 11/19/2017  <u><b>Deficiencies</b></u> Of the 11 children's records reviewed, 4 is/are missing the name and telephone number of a physician or emergency medical center authorized by a parent or guardian to contact in case of illness or emergency. See Children's Records 8.16.2.22 form for the child(ren) with missing information.  <b>Regulation:</b> 8.16.2.22E(2)(c)  <u><b>Corrective Action Plan</b></u> Parents will be advised to review and add missing information. The center will review all children's records to ensure contact information for a physician or medical center is on file.  <b>Date to be Completed:</b> 11/19/2017  <u><b>Deficiencies</b></u> Of the 11 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.  <b>Regulation:</b> 8.16.2.22E(2)(a)  <u><b>Corrective Action Plan</b></u> 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.  <b>Date to be Completed:</b> 11/19/2017		Non-compliance
<b>8.16.2.22 F PERSONNEL RECORDS</b>  <u><b>Deficiencies</b></u> From the review of staff records, it was determined that 5 out of 8 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.  <b>Regulation:</b> 8.16.2.22F(1)(n)  <u><b>Corrective Action Plan</b></u> The center will have staff complete a professional development plan and sign the plan . The plan will be maintained on file.  <b>Date to be Completed:</b> 11/19/2017		Non-compliance

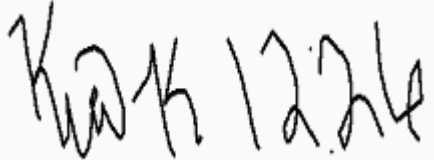
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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 8 out of 8 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.22 form for staff with missing documentation. <b>Regulation:</b> 8.16.2.22F(1)(h)</p> <p><b><u>Corrective Action Plan</u></b> The center will obtain verification of all training and retain on file. <b>Date to be Completed:</b> 11/19/2017</p>		
<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Not Inspected	
<b>Personnel &amp; Staffing</b>		
<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>	Compliance	
<p><b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b></p> <p><b><u>Deficiencies</u></b> Educators did not complete the following training within 3-months: Health and Safety Training <b>Regulation:</b> 8.16.2.23B(2)(b)</p> <p><b><u>Corrective Action Plan</u></b> 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: One educator needs to complete Health &amp; Safety <b>Date to be Completed:</b> 11/19/2017</p> <p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 1 out of 8 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation. <b>Regulation:</b> 8.16.2.23B(2)(a)</p> <p><b><u>Corrective Action Plan</u></b> Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children. <b>Date to be Completed:</b> 11/19/2017</p>	Non-compliance	
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>	Compliance	
<b>Services &amp; Care of Children</b>		
<b>8.16.2.24 A GUIDANCE</b>	Compliance	
<b>8.16.2.24 B NAPS OR REST PERIOD</b>	N/A	
<p><b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b></p> <p><b><u>Deficiencies</u></b> Center did not provide an evacuation crib. <b>Regulation:</b> 8.16.2.24C(15)</p> <p><b><u>Corrective Action Plan</u></b> The facility will procure an evacuation crib for us with future fire drills and evacuations. <b>Date to be Completed:</b> 11/19/2017</p>	Non-compliance	
<b>8.16.2.24 D DIAPERING AND TOILETING</b>	Compliance	

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<b>Services &amp; Care of Children</b>		
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	Compliance	
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Compliance	
8.16.2.24 I EQUIPMENT AND PROGRAM	Compliance	
<b>8.16.2.24 J OUTDOOR PLAY AREAS</b> <u><b>Deficiencies</b></u> The playground equipment isn't inspected weekly. <b>Regulation:</b> 8.16.2.24J(4)  <u><b>Corrective Action Plan</b></u> The facility will hold weekly inspections of their playground equipment. Provider will begin utilizing a daily checklist. <b>Date to be Completed:</b> 11/19/2017	Non-compliance	
8.16.2.24 K SWIMMING, WADING AND WATER	Not Inspected	
8.16.2.24 L FIELD TRIPS	Not Inspected	
<b>Food Service</b>		
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	
<b>Health &amp; Safety Requirements</b>		
8.16.2.26 A HYGIENE	Compliance	
<b>8.16.2.26 B FIRST AID REQUIREMENTS</b> <u><b>Deficiencies</b></u> The center's first aid kit does not contain Soap . (Jelly room) <b>Regulation:</b> 8.16.2.26B(2)  <u><b>Corrective Action Plan</b></u> Missing items will be added to the first-aid kit; staff will be reminded to replace any item used. <b>Date to be Completed:</b> 11/19/2017  <u><b>Deficiencies</b></u> The center does not have on duty all educators currently certified in first aid and cardiopulmonary resuscitation (CPR). <b>Regulation:</b> 8.16.2.26B(1)  <u><b>Corrective Action Plan</b></u> All educators must be certified in first aid and cardiopulmonary resuscitation (CPR). Van driver will not drive without an certified educator. <b>Date to be Completed:</b> 11/19/2017	Non-compliance	
8.16.2.26 C MEDICATION	Compliance	

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<b>Health &amp; Safety Requirements</b>		
<b>8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS</b>	Compliance	
<b>8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS</b>  <u><b>Deficiencies</b></u> The vehicle used for transporting children does not have insurance coverage. Expired 7/1/17 <b>Regulation:</b> 8.16.2.28H  <u><b>Corrective Action Plan</b></u> insurance coverage will be obtained. Administrator will forward proof of insurance before the end of the day. <b>Date to be Completed:</b> 10/19/2017  <u><b>Deficiencies</b></u> A vehicle used for transporting children is not equipped with a first-aid kit. The first aid kit is missing soap. <b>Regulation:</b> 8.16.2.28A  <u><b>Corrective Action Plan</b></u> The vehicle will be equipped with required items. <b>Date to be Completed:</b> 11/19/2017	Non-compliance	
<b>Buildings, Grounds &amp; Safety</b>		
<b>8.16.2.29 A HOUSEKEEPING</b>  <u><b>Deficiencies</b></u> The Premises are not in good repair as evidenced by the handwashing sink in the Jelly room is not operable. <b>Regulation:</b> 8.16.2.29A(1)  <u><b>Corrective Action Plan</b></u> Repairs will be completed and a system for routine inspection of the center and premises will be established. <b>Date to be Completed:</b> 11/19/2017  <u><b>Deficiencies</b></u> The Fixtures are not in good repair as evidenced by one light out in the Jelly Room. <b>Regulation:</b> 8.16.2.29A(1)  <u><b>Corrective Action Plan</b></u> Repairs will be completed and a system for routine inspection of the center and premises will be established. <b>Date to be Completed:</b> 11/19/2017  <u><b>Deficiencies</b></u> The Fixtures are not in good repair as evidenced by one balance light out in the Jelly room. <b>Regulation:</b> 8.16.2.29A(1)  <u><b>Corrective Action Plan</b></u> Repairs will be completed and a system for routine inspection of the center and premises will be established. <b>Date to be Completed:</b> 11/19/2017	Non-compliance	
<b>8.16.2.29 B PEST CONTROL</b>	Compliance	
<b>8.16.2.29 C MECHANICAL SYSTEMS</b>	Compliance	

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<b>Buildings, Grounds &amp; Safety</b>		
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, 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.**



10/19/2017



10/19/2017

Surveyor: Kia Kennedy

Date

Facility Rep: Gabriele Ramsey

Date