

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Facility						
Name: Springstone Grande					License N	Number: 97181
Address: 2441 Grande Blvd SE, Rio Rancho, NM 87124						
Phone: 5059948111 Fax:		E-mail: grande@springstonekids.com				
License Information						
<b>Type</b> : 5 Star FOCUS Child Care Center	Status: Licensed		Issue Date: 03/22/2018		Expiratio 03/21/20	
Capacity						
Over Age 2: <i>148</i> Square Footage: <i>0</i>	Under Age 2: <i>28</i>		Night Care	: 0	Playgrou	nd: <i>100</i>
Census						
Over 2: 105	Under 2: 11					
Classrooms						
Number of Classrooms:	10					
Days and Hours of Operatic	on					
<b>Monday</b> 6:00 AM - 6:00 PM 6	<b>Tuesday</b> 5:00 AM - 6:00 PM		nesday 1 - 6:00 PM	Thursday 6:00 AM - 6:0	•	Friday :00 AM - 6:00 PM
Saturday Closed	Sunday Closed					
Inspection						
Date: 01/16/2019	Time In: 9:20 AM		Time Out: 1	1:48 PM	Purpose:	Annual
Licensure						
8.16.2.11 A Types of Lice	nses					Not Inspected
8.16.2.11 B Renewal of Li	icense					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 Inspec					Not Inspected	
8.16.2.17 E, F Surveys for Child Care Facilities Complian					Compliance	
8.16.2.18 D Complaints Not Inspec					Not Inspected	
8.16.2.21 A Licensing Requirements						Not Inspected
8.16.2.21 B Capacity of Centers Complia					Compliance	

# 8.16.2.21 C Incident Reporting Requirements

# Administrative Requirements

Compliance	
Not Inspected	
Compliance	
Not Inspected	
Non-compliance	

Of the 20 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.

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.

Regulation: 8.16.2.22.E.1.e.

Date to be Completed: 02/15/2019

Of the 20 children's records reviewed, 2 is/are missing the name and telephone number of two people in the local area to contact in an emergency when a parent or guardian cannot be reached. 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 up-to-date emergency contact information is on file.

Regulation: 8.16.2.22.E.2.b.

Date to be Completed: 02/15/2019

Of the 20 children's records reviewed, 1 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.

Corrective Action Plan

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.

Regulation: 8.16.2.22.E.2.c.

Date to be Completed: 02/15/2019

Not Inspected

### Non-compliance

Of the 20 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

8.16.2.22 E Children's Records (continued)

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.

Regulation: 8.16.2.22.E.2.d.

Date to be Completed: 02/15/2019

Of the 20 children's records reviewed, 2 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.

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.

Regulation: 8.16.2.22.E.2.a.

Of the 20 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.

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.

Regulation: 8.16.2.22.E.1.l.

8.16.2.22 F Personnel Records

From the review of staff records, it was determined that 2 out of 17 staff records do/does not include the staffs 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 staffs current and past duties and responsibilities to the record.

Regulation: 8.16.2.22.F.1.c.

Date to be Completed: 02/15/2019

Non-compliance

Date to be Completed: 02/15/2019

Date to be Completed: 02/15/2019

Personnel & Staffing

8.16.2.22 F Personnel Records (continued) Non-compliance From the review of staff records, it was determined that 7 out of 17 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. Regulation: 8.16.2.22.F.1.n. Date to be Completed: 02/15/2019 From the review of staff records, it was determined that 1 out of 17 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. Regulation: 8.16.2.22.F.1.o. Date to be Completed: 02/15/2019 From the review of staff records, it was determined that 1 out of 17 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. Regulation: 8.16.2.22.F.1.p. Date to be Completed: 02/15/2019

From the review of staff records, it was determined that 4 out of 17 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.

https://cyfd.org/

*Corrective Action Plan The center will obtain verification of all training and retain on file.* 

Regulation: 8.16.2.22.F.1.h.

# 8.16.2.22 G Personnel Handbook

8.16.2.23 A Personnel and Staffing Requirements

Date to be Completed: 02/15/2019

Not Inspected

Compliance

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# https://cyfd.org/

# Personnel & Staffing (continued)

Springstone Grande

# 8.16.2.23 B Staff Qualifications and Training

From the review of staff records, it was determined that 4 out of 17 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.

Regulation: 8.16.2.23.B.2.a.

# 8.16.2.23 C Staff/Child Ratios and Group Sizes

# Services & Care of Children

## 8.16.2.24 A Guidance

Of the 20 children's records reviewed, 1 is/are missing a signed parent/guardian acknowledgement that the center's guidance policy had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

Corrective Action Plan The center will review all children's records to ensure a signed parent or guardian acknowledgement is on file.

Regulation: 8.16.2.24.A.1.

Of the 17 staffs records reviewed, 1 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 child(ren) who have this missing.

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

Regulation: 8.16.2.24.A.1.	Date to be Completed: 02/15/2019
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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	Compliance
8.16.2.24 F Additional Requirements for Night Care	Not Inspected

# Non-compliance

Compliance

Date to be Completed: 02/15/2019

Date to be Completed: 02/15/2019

Non-compliance

# 8.16.2.24 G Physical Environment

Materials were not cared for and organized by type and labeled with words and/or pictures where appropriate. Practical life shelving not labeled in the Maple Room and containers not labeled in Practical life area in Sequoia room.

Corrective Action Plan Materials will be well cared for and organized by type and labeled with words and/or pictures where appropriate.

Regulation: 8.16.2.24.G.6.

Date to be Completed: 02/15/2019

### 8.16.2.24 H Social-Emotional Responsive Environment

### 8.16.2.24 I Equipment and Program

### 8.16.2.24 J Outdoor Play Areas

The playground equipment isn't inspected weekly.

*Corrective Action Plan The facility will hold weekly inspections of their playground equipment.* 

Regulation: 8.16.2.24.J.4.

Date to be Completed: 02/15/2019

Date to be Completed: 02/15/2019

The weekly playground equipment inspections are not documented correctly.

*Corrective Action Plan The facility will document their weekly playground inspections.* 

Regulation: 8.16.2.24.J.4.

8.16.2.24 K Swimming, Wading and Water

8.16.2.24 L Field Trips

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

Not Inspected

Not Inspected

Non-compliance

Compliance

Non-compliance

Compliance

Health & Safety Requirements

### 8.16.2.26 A Hygiene

### 8.16.2.26 B First Aid Requirements

The center's first aid kit does not contain gauze and tape.

## Corrective Action Plan

Missing items will be added to the first-aid kit; staff will be reminded to replace any item used.

Regulation: 8.16.2.26.B.2.

The center does not have on duty all educators currently certified in first aid and cardiopulmonary resuscitation (CPR). 4 educators need FA/CPR certification.

Corrective Action Plan

All educators must be certified in first aid and cardiopulmonary resuscitation (CPR).

Regulation: 8.16.2.26.B.1.

8.16.2.26 C Medication

When medication is no longer needed, it is not returned to the parents or guardians or destroyed but it remains in the center. Expired inhaler Dec.2017

Corrective Action Plan Medication no longer needed or expired will be returned to the parents or guardians or destroyed.

Regulation: 8.16.2.26.C.5.	Date to be Completed: 02/15/2019
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8.16.2.27 A-D Illness Requirements for Centers

8.16.2.28 A-H Transportation Requirements for Centers

### Buildings, Grounds & Safety Compliance 8.16.2.29 A Housekeeping 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 Compliance 8.16.2.29 G Toilet and Bathing Facilities 01/16/2019 https://cyfd.org/ 7 of 8

Compliance

Non-compliance

Date to be Completed: 02/15/2019

Date to be Completed: 02/15/2019

Compliance

N/A

Non-compliance

Compliance

# Buildings, Grounds & Safety (continued)

### 8.16.2.29 H Safety Compliance

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

Compliance N/A

8.16.2.29 J Pets

Additional Comments

Environmental health inspection expires 2/5/19. Fire inspection expires 3/9/19.

### 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: Annastesia Kendrick