

<b>Center Name:</b> St. Francis School		<b>Address:</b> 215 W. Wilson Ave. Gallup, NM 87301			<b>Phone:</b> (505)863-3145		
<b>License Number:</b> 144557	<b>Issue Date:</b> 07/29/2016	<b>Expiration Date:</b> 07/28/2017	<b>Type:</b> 5 Star FOCUS Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	50	Under Age 2:	0	Night Care:	0	Playground:	60
		Over 2:	29	Under 2:	0		
<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:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed
Closing Times:	06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
<b># of Classrooms:</b> 3	<b>Purpose:</b> Semi-Annual		<b>Date:</b> 02/01/2017		<b>Time:</b> 11:00 AM		
<b>Comments</b> Discussed regulations, background information, Disaster Preparedness Plan and Expulsion Policy. Left Documentation.							

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	N/A
8.16.2.11 B RENEWAL OF LICENSE	N/A
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	N/A
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	N/A
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Compliance
8.16.2.18 D COMPLAINTS	N/A
8.16.2.21 A LICENSING REQUIREMENTS	Compliance
8.16.2.21 B CAPACITY OF CENTERS	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	N/A
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.22 C POLICY AND PROCEDURES  <u>Deficiencies</u> The center did not have available for review written policies and procedures covering emergency evacuation and disaster preparedness; expulsion of children.  <b>Regulation:</b> 8.16.2.22C(1)-(8)  <u>Corrective Action Plan</u> The center will complete written policies and procedures for the missing area(s).  <b>Date to be Completed:</b> 03/03/2017	Non-compliance
8.16.2.22 D FAMILY HANDBOOK	Compliance
8.16.2.22 E CHILDREN'S RECORDS	Non-compliance

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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b> Of the 6 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. <b>Regulation:</b> 8.16.2.22E(1)(e)</p> <p><b><u>Corrective Action Plan</u></b> 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> 03/03/2017</p> <p><b><u>Deficiencies</u></b> Of the 6 children's records reviewed, 1 does/do not have any personal or emergency information on file. See the Children's Records 8.16.2.22 form for the name of any child needing a complete record. Note: File was incomplete. <b>Regulation:</b> 8.16.2.22E(1)(2)</p> <p><b><u>Corrective Action Plan</u></b> Parents will be advised to complete all required information. The center will review enrollment procedures to ensure complete personal and emergency information is on file before a child is admitted. <b>Date to be Completed:</b> 03/03/2017</p>		
<p><b>8.16.2.22 F PERSONNEL RECORDS</b></p> <p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 5 out of 8 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information. <b>Regulation:</b> 8.16.2.22F(1)(e)</p> <p><b><u>Corrective Action Plan</u></b> The center will obtain documentation of a background check. <b>Date to be Completed:</b> 02/03/2017</p> <p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 8 out of 8 staff having direct contact with the children, does/do not have a complete file as required in 8.16.2.22F. See Staff Records 8.16.2.22 form for staff with an incomplete file. <b>Regulation:</b> 8.16.2.22F(1)</p> <p><b><u>Corrective Action Plan</u></b> The program will complete a file for each staff including substitutes and volunteers. <b>Date to be Completed:</b> 03/03/2017</p>	Non-compliance	
<p><b>8.16.2.22 G PERSONNEL HANDBOOK</b></p>	Compliance	
<b>Personnel &amp; Staffing</b>		
<p><b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b></p>	Compliance	
<p><b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b></p>	Not Inspected	
<p><b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b></p>	Non-compliance	

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### Personnel & Staffing

**Deficiencies**

The center failed to post the capacity for each activity/interest area. 3 out of 3 classrooms failed to post the capacity for each activity/interest area.

**Regulation:** 8.16.2.23 C (2)(b)

**Corrective Action Plan**

Each activity/interest area will have a posted capacity, which may vary according to the activity and size of the space, and will not exceed the group size requirement as specified in Paragraph (1) of Subsection C of 8.16.2.23 NMAC

**Date to be Completed:** 03/03/2017

### Services & Care of Children

8.16.2.24 A GUIDANCE	Compliance
8.16.2.24 B NAPS OR REST PERIOD	Not Inspected
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	N/A
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	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	N/A
8.16.2.24 L FIELD TRIPS	Compliance

### 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	Compliance
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

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<b>Buildings, Grounds &amp; Safety</b>		
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 <b>Deficiencies</b> The center does not have verification of an annual fire inspection from the fire authority having jurisdiction. <b>Regulation:</b> 8.16.2.29H(3)(e) <b>Corrective Action Plan</b> An annual fire inspection will be requested from the fire authority having jurisdiction over the center. <b>Date to be Completed:</b> 03/03/2017		Non-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.

*Peggy Waconda*

02/01/2017

*Bro. Maynard Shuley*

02/01/2017

Surveyor: Peggy Waconda

Date

Facility Rep: Brother Maynard for Sr. Lilliana G

Date