



Center Name: YDI Heights Head Start			Address: 2520 Virginia NE Albuquerque, NM 87110			Phone: (505)291-9394		
License Number: 90506	Issue Date: 08/12/2016	Expiration Date: 04/30/2017	Type: 5 Star FOCUS Child Care Center			Status: Licensed		
Capacity Over Age 2: 82 Under Age 2: 41 Night Care: 0 Playground: 33						Census Over 2: 58 Under 2: 8		
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:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed	
Closing Times:	05:00 PM	05:00 PM	05:00 PM	05:00 PM	05:00 PM			
# of Classrooms: 6		Purpose: Annual		Date: 04/11/2017		Time: 09:30 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 <u>Deficiencies</u> The center failed to post classroom <u>capacities, and ratios</u> and <u>group sizes</u> in an area of the room that is easily visible to parents, staff and visitors. All classrooms do not have the group sizing posted. H-1 and H-2 do not have the capacities posted. Regulation: 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. Date to be Completed: 05/11/2017	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	Compliance
8.16.2.22 C POLICY AND PROCEDURES	Compliance
8.16.2.22 D FAMILY HANDBOOK	Compliance

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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 10 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) <u>Corrective Action Plan</u> The center will obtain documentation of first-aid and CPR training and retain on file. Date to be Completed: 05/11/2017 <u>Deficiencies</u> From the review of staff records, it was determined that 2 out of 10 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) <u>Corrective Action Plan</u> The center will obtain verification of all training and retain on file. Date to be Completed: 05/11/2017	Non-compliance	
8.16.2.22 G PERSONNEL HANDBOOK	Compliance	
Personnel & Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance	
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING <u>Deficiencies</u> Educators did not complete the following training within 3-months: Health and Safety Training for 6 staff members. Regulation: 8.16.2.23B(2)(b) <u>Corrective Action Plan</u> 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: Date to be Completed: 05/11/2017	Non-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	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	N/A	
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	

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Services & Care of Children		
8.16.2.24 I EQUIPMENT AND PROGRAM	Compliance	
8.16.2.24 J OUTDOOR PLAY AREAS <u>Deficiencies</u> The playground equipment isn't inspected weekly. Regulation: 8.16.2.24J(4) <u>Corrective Action Plan</u> The facility will hold weekly inspections of their playground equipment. Date to be Completed: 05/11/2017 <u>Deficiencies</u> The weekly playground equipment inspections are not documented correctly. Regulation: 8.16.2.24J(4) <u>Corrective Action Plan</u> The facility will document their weekly playground inspections. Date to be Completed: 05/11/2017	Non-compliance	
8.16.2.24 K SWIMMING, WADING AND WATER	N/A	
8.16.2.24 L FIELD TRIPS	N/A	
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	Not Inspected	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS	Not Inspected	
Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING <u>Deficiencies</u> The H-5 classroom has a heavy accumulation of clutter on the cabinets, and the blue cabinet above the sleeping mats will not close due to storage items. Regulation: 8.16.2.29A(1) <u>Corrective Action Plan</u> A routine will be established to assess all areas of the premises for cleanliness , safety and potential hazards. Date to be Completed: 05/11/2017	Non-compliance	

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Buildings, Grounds & Safety		
<p><u>Deficiencies</u> The equipment in the H-4 classroom are not safe in that 3 cribs are being used for storage. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> The safety violation will be corrected and a system for routine safety inspection developed. Date to be Completed: 05/11/2017</p> <p><u>Deficiencies</u> The Equipment are not in good repair as evidenced by torn sleeping mats in classroom H-2. Regulation: 8.16.2.29A(1)</p> <p><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: 05/11/2017</p>		
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 a fire drill for the month(s) of January; February; March of 2017; August; September; October of 2016; November; December. Regulation: 8.16.2.29H(2) <u>Corrective Action Plan</u> A monthly fire drill will be held and recorded. Date to be Completed: 05/11/2017	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.

LM 1:30

04/11/2017

Julie Chase

04/11/2017

Surveyor: Lucille Mizner	Date	Facility Rep: Gabriel Ramsey	Date
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