

Center Name: YDI Mesa Verde Head Start		Address: 7900 Marquette NE Albuquerque, NM 87108			Phone: (505)232-0086		
License Number: 90514	Issue Date: 03/2/2017	Expiration Date: 03/1/2018	Type: 5 Star FOCUS Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	59	Under Age 2:	0	Night Care:	0	Playground:	48
		Over 2:	43	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:	07:30 AM	07:30 AM	07:30 AM	07:30 AM	07:30 AM	Closed	Closed
Closing Times:	03:00 PM	03:00 PM	03:00 PM	03:00 PM	03:00 PM		
# of Classrooms: 3	Purpose: Annual		Date: 01/04/2018		Time: 10:30 AM		
Comments							

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure

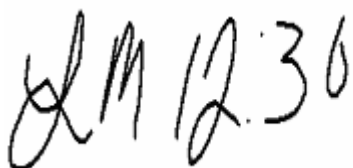
8.16.2.11 A TYPES OF LICENSES <u>Deficiencies</u> The child care facility failed to submit a new application to the licensing authority before modifying information required to be stated on the license as follows: director. Regulation: 8.16.2.11A(3) <u>Corrective Action Plan</u> A notarized renewal application will be completed and submitted with the required fee prior to any changes being made to the current license. Date to be Completed: 02/04/2018	Non-compliance
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	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Non-compliance

Center Name: YDI Mesa Verde Head Start	License Number: 90514	Date: 01/04/2018
Administrative Requirements		
<p><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. Regulation: 8.16.2.22A</p> <p><u>Corrective Action Plan</u> The center will post the missing item. Date to be Completed: 02/04/2018</p>		
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	
8.16.2.22 E CHILDREN'S RECORDS	Compliance	
<p>8.16.2.22 F PERSONNEL RECORDS</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 3 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)</p> <p><u>Corrective Action Plan</u> The center will obtain documentation of first-aid and CPR training and retain on file. Date to be Completed: 02/04/2018</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 3 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)</p> <p><u>Corrective Action Plan</u> The center will obtain verification of all training and retain on file. Date to be Completed: 02/04/2018</p>	Non-compliance	
8.16.2.22 G PERSONNEL HANDBOOK	Compliance	
Personnel & Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance	
<p>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</p> <p><u>Deficiencies</u> Educators did not complete the following training within 3-months: Health and Safety Training Regulation: 8.16.2.23B(2)(b)</p> <p><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: 02/04/2018</p>	Non-compliance	
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Compliance	
Services & Care of Children		

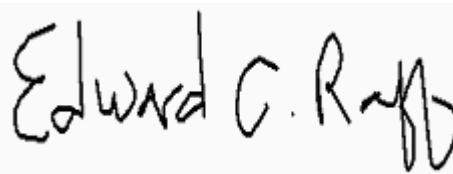
Center Name: YDI Mesa Verde Head Start	License Number: 90514	Date: 01/04/2018
Services & Care of Children		
8.16.2.24 A GUIDANCE		Compliance
8.16.2.24 B NAPS OR REST PERIOD		Compliance
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		N/A
8.16.2.24 D DIAPERING AND TOILETING		Compliance
8.16.2.24 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
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		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		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 Deficiencies The center does not have emergency lighting that turns on automatically when electrical service is disrupted. At the entrance doors to MV2 & MV3. Regulation: 8.16.2.29E(2) Corrective Action Plan Emergency lighting will be installed. Date to be Completed: 02/04/2018		Non-compliance

Center Name: YDI Mesa Verde Head Start	License Number: 90514	Date: 01/04/2018
Buildings, Grounds & Safety		
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: 02/04/2018 <u>Deficiencies</u> The center failed to conduct a fire drill for the month(s) of 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: 02/04/2018	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.



01/04/2018



01/04/2018

Surveyor: Lucille Mizner

Date

Facility Rep: Edward Raff

Date