

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:				_		EI KEF						Dhon	<u></u>	
				Address: Phon 7900 Marquette NE										
YDI Mesa Verde Head Start				Albuquerque, NM 87108 (505)2				32-0060						
License Numbe	er:	Issue Date:		cpiration D	ate:	Туре:				Status:				
90514		03/2/2016	03	/1/2017		5 Star FC	CUS Child Car	e Center		Licensed				
Capacity	50	Linden Ann Or	0	Ni sht C	·	0	Disconstructu	40		nsus	10		Lindan Or	0
Over Age 2:	59	Under Age 2:	0	Night C	are:	0	Playground:	48	Ove	er 2:	49		Under 2:	0
Days and Hour	s of C	Operation												
Opening Ti	imoo:	<u>Monday</u> 07:30 AM		<u>Tuesday</u> 07:30 AM		<u>/ednesday</u> 07:30 AM	<u>Thurs</u> 07:30	-		iday 80 AM	5	Saturda Closed	У	<u>Sunday</u> Closed
Closing Ti		07:30 AM 03:00 PM		03:00 PM		03:00 PM	07:50			0 PM		Closed		Closed
# of Classroom			Purpos	se:			Date:				Tim	ne:		
3			Annual				01/17/2017				09:4	40 AM		
Comments														
The staff at the were left at the			ed the h	ealth and s	afety trair	ning. The c	urrent NM Ch	ild Care reg	Julatio	ons, as we	ll as r	resourc	es	
A	SURV	EY OF YOUR FAC	ILITY HA	S BEEN MAD	E AND YOU	J ARE NOTIF	IED OF NON-CO	MPLIANCE C	DF THE	E REGULATI	ONS	AS NOTE	D BELOW:	
						Lice	ensure							
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						N	on-compliance							
Deficiencies														
The center failed to post classroom <u>capacities,</u> and ratios and <u>group sizes</u> in an area of the room that is easily visible to parents, staff and visitors.														
Regulation:		2	- parei	no, sidii d		э.								
Corrective	Actic	n Plan												
		ost the capaci	ty in a	n area of t	he room	that is ea	sily visible to	parents, s	staff					
and visitors.														
Date to be 0	Compl	eted: 02/17/2017												
8.16.2.21 C INC			REQU	REMENTS										Not Inspected
					Admi	inistrativ	e Require	nents						
8.16.2.22 A AD	MINIS	STRATION REC	ORDS										N	on-compliance

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Center Name:	License Number:	Date:	
YDI Mesa Verde Head Start	90514	01/17/2017	
Administrative Red	quirements		
Deficiencies         The center failed to display in a prominent place that is readily visible to visitors the current list of notifiable diseases and communicable diseases office of epidemiology of the New Mexico department of health.         Regulation: 8.16.2.22A         Corrective Action Plan         The center will post the missing item.         Date to be Completed: 02/17/2017			
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT			Compliance
8.16.2.22 C POLICY AND PROCEDURES			Non-compliance
Deficiencies         The center did not have available for review written policies and procedul expulsion of children.         Regulation: 8.16.2.22C(1)-(8)         Corrective Action Plan         The center will complete written policies and procedures for the missing			
The center will complete written policies and procedures for the missing Date to be Completed: 02/17/2017	area(s).		
Deficiencies The program does not have an up to date emergency evacuation and di plan approved by the department. Plan is missing the following compone care. Regulation: 8.16.2.22C(8) Corrective Action Plan			
An emergency evacuation and disaster preparedness plan will be developed to be Completed: 02/17/2017	oped.		
8.16.2.22 D FAMILY HANDBOOK			Compliance
8.16.2.22 E CHILDREN'S RECORDS			Compliance
<ul> <li>8.16.2.22 F PERSONNEL RECORDS</li> <li>Deficiencies From the review of staff records, it was determined that 4 out of 7 staff reinclude a background check completed every 5 years. See Staff Record staff with this missing information. I Regulation: 8.16.2.22F(1)(e) Corrective Action Plan The center will obtain documentation of a background check. Date to be Completed: 02/17/2017</li></ul>			Non-compliance

Center Name:	License Number:	Date:
YDI Mesa Verde Head Start	90514	01/17/2017
Admini	strative Requirements	
Deficiencies From the review of staff records, it was determined that 1 of include documentation of current first-aid and cardiopulmor Staff Records 8.16.2.22 form for staff without verification of Regulation: 8.16.2.22F(1)(g)	nary resuscitation training. See	
<u>Corrective Action Plan</u> The center will obtain documentation of first-aid and CPR to Date to be Completed: 02/17/2017	raining and retain on file.	
Deficiencies From the review of staff records, it was determined that 100 include signed acknowledgement that the personnel handb understood. See Staff Records 8.16.2.22 form for staff who acknowledgement. Regulation: 8.16.2.22F(1)(o)	ook had been read and	
<u>Corrective Action Plan</u> The center will have staff complete the required acknowled Date to be Completed: 02/17/2017	gement and will retain on file .	
8.16.2.22 G PERSONNEL HANDBOOK		Compliance
Pe	rsonnel & Staffing	
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS		Compliance
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING		Compliance
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES		Compliance
Servic	es & Care of Children	ł
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 TO	DDLERS	N/A
8.16.2.24 D DIAPERING AND TOILETING Deficiencies The diaper changing surface in the Combination Class child waterproof.Changing mat is torn. Regulation: 8.16.2.24D(4)	dren's bathroom room(s) is not	Non-compliance
<u>Corrective Action Plan</u> An educator will change a child's diaper on a clean, safe, w any disposable cover and disinfect the surface after each d Date to be Completed: 02/17/2017	-	
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
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Center Name: YDI Mesa Verde Head Start	License Number: 90514	Date: 01/17/2017	
		01/1//2017	
	Care of Children		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
Foc	od 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 & Sa	fety 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
<u>Deficiencies</u> The premises in the MV3 classroom are not safe in that a screw handle on the classroom sink.	v is protruding from the		
Regulation: 8.16.2.29A(1)			
Corrective Action Plan The safety violation will be corrected and a system for routine sa Date to be Completed: 02/17/2017	afety inspection developed.		
Deficiencies The premises in the MV1 classroom are not safe in that bleach l children under the cabinet, and purses are on a low shelve also Regulation: 8.16.2.29A(1)			
Corrective Action Plan The safety violation will be corrected and a system for routine sa Date to be Completed: 02/17/2017	afety inspection developed.		
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			Non-compliance

Center Name:	License Number:	Date:		
YDI Mesa Verde Head Start	90514	01/17/2017	01/17/2017	
Buildin	gs, Grounds & Safety			
Deficiencies The center does not have emergency lighting that turns on service is disrupted.The emergency light in classroom MV3 Regulation: 8.16.2.29E(2)	-			
Corrective Action Plan Emergency lighting will be installed. Date to be Completed: 02/17/2017				
8.16.2.29 F EXITS AND WINDOWS			Non-compliance	
Deficiencies         Exit ways are obstructed and do not permit free egress from in the Combination Class MV1 room(s).         Regulation: 8.16.2.29F(3)         Corrective Action Plan         Exit ways will be kept free from obstructions at all times.         Date to be Completed: 02/17/2017	n inside the center to the outside			
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, ILL	EGAL DRUGS AND CONTROLLED SUBS	TANCES	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.

Lyver 12:30

01/17/2017

Date

Lou Edmine

Facility Rep:Lori Edmonds

01/17/2017

Surveyor:Lucille Mizner

Date