

<b>Center Name:</b> Auntie Nikki's Day Care LLC		<b>Address:</b> 267 Courthouse Rd Los Lunas, NM 87031			<b>Phone:</b> (505)866-8933		
<b>License Number:</b> 158988	<b>Issue Date:</b> 12/19/2016	<b>Expiration Date:</b> 09/30/2017	<b>Type:</b> 2 Star + Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	49	Under Age 2:	32	Night Care:	0	Playground:	81
		Over 2:	19			Under 2:	1
<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:	05:30 AM	05:30 AM	05:30 AM	05:30 AM	05:30 AM	Closed	Closed
Closing Times:	06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
<b># of Classrooms:</b> 4	<b>Purpose:</b> Annual		<b>Date:</b> 01/05/2017		<b>Time:</b> 10:19 AM		
<b>Comments</b> Paper surveys dated 10/20/16							

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	Compliance
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 <u>Deficiencies</u> The center failed to display in a prominent place that is readily visible to parents, staff and visitors the dated weekly menus for meals and snacks. <b>Regulation:</b> 8.16.2.22A  <u>Corrective Action Plan</u> The center will post the missing item. <b>Date to be Completed:</b> 11/19/2016	Non-compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.22 C POLICY AND PROCEDURES	Non-compliance

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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b>  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)</p> <p><b><u>Corrective Action Plan</u></b>  The center will complete written policies and procedures for the missing area(s).  <b>Date to be Completed:</b> 11/19/2016</p>		
<b>8.16.2.22 D FAMILY HANDBOOK</b>	Compliance	
<b>8.16.2.22 E CHILDREN'S RECORDS</b>	Compliance	
<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 2 out of 11 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.  <b>Regulation:</b> 8.16.2.22F(1)(P)</p> <p><b><u>Corrective Action Plan</u></b>  The center will have staff complete the required acknowledgement and will retain on file.  <b>Date to be Completed:</b> 11/19/2016</p> <p><b><u>Deficiencies</u></b>  The center failed to have 5 out of 11 person(s) providing care to sign an annual statement that they have, or have never had, an arrest or substantiated referral to a child protective services agency. See Staff Records 8.16.2.22 form for staff with this missing information.  <b>Regulation:</b> 8.16.2.22F(1)(f)</p> <p><b><u>Corrective Action Plan</u></b>  The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction.  <b>Date to be Completed:</b> 11/19/2016</p> <p><b><u>Deficiencies</u></b>  From the review of staff records, it was determined that 2 out of 11 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.  <b>Regulation:</b> 8.16.2.22F(1)(o)</p> <p><b><u>Corrective Action Plan</u></b>  The center will have staff complete the required acknowledgement and will retain on file.  <b>Date to be Completed:</b> 11/19/2016</p> <p><b><u>Deficiencies</u></b>  From the review of staff records, it was determined that 1 out of 11 staff records does/do not include the required Form I-9. See Staff Records 8.16.2.22 form for staff missing the form.  <b>Regulation:</b> 8.16.2.22F(1)(q)</p> <p><b><u>Corrective Action Plan</u></b>  The center will obtain Form I-9s from all staff and maintain them in their personnel files.  <b>Date to be Completed:</b> 11/19/2016</p>	Non-compliance	
<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Compliance	

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<b>Personnel &amp; Staffing</b>		
<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>		Compliance
<b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b>  <u><b>Deficiencies</b></u> Educators did not complete the following training within 3-months: Health and Safety Training; CPR Training <b>Regulation:</b> 8.16.2.23B(2)(b)  <u><b>Corrective Action Plan</b></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: <b>Date to be Completed:</b> 11/19/2016  <u><b>Deficiencies</b></u> From the review of staff records, it was determined that 1 out of 11 staff does/do not have documentation of the 45-hour entry level course or an approved equivalent prior to or within six months of employment. <b>Regulation:</b> 8.16.2.23B(2)(c)  <u><b>Corrective Action Plan</b></u> Training will be completed for staff as required and documentation retained on file . <b>Date to be Completed:</b> 11/19/2016  <u><b>Deficiencies</b></u> From the review of staff records, it was determined that 2 out of 11 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation. <b>Regulation:</b> 8.16.2.23B(2)(a)  <u><b>Corrective Action Plan</b></u> Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children . <b>Date to be Completed:</b> 11/19/2016		Non-compliance
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>  <u><b>Deficiencies</b></u> The center failed to post the capacity for each activity/interest area. 4 out of 4 classrooms failed to post the capacity for each activity/interest area. <b>Regulation:</b> 8.16.2.23 C (2)(b)  <u><b>Corrective Action Plan</b></u> 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 <b>Date to be Completed:</b> 11/19/2016		Non-compliance
<b>Services &amp; Care of Children</b>		
<b>8.16.2.24 A GUIDANCE</b>		Non-compliance

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### Services & Care of Children

**Deficiencies**

Of the 2 staff's records reviewed, 11 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.

**Regulation:** 8.16.2.24A(1)

**Corrective Action Plan**

The center will review all staff's records to ensure a signed staff acknowledgement is on file.

**Date to be Completed:** 11/19/2016

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	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	Not Inspected

### Food Service

8.16.2.25 B MEALS AND SNACKS	Compliance
8.16.2.25 C MENUS	Compliance
8.16.2.25 D KITCHENS <b><u>Deficiencies</u></b> Food is not promptly refrigerate after use. Baby bottle <b>Regulation:</b> 8.16.2.25D(3) <b><u>Corrective Action Plan</u></b> The person responsible for food preparation and serving will be instructed to serve food promptly and refrigerate immediately after use. <b>Date to be Completed:</b> 11/19/2016	Non-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	Compliance

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<b>Buildings, Grounds &amp; Safety</b>		
<b>8.16.2.29 A HOUSEKEEPING</b> <u>Deficiencies</u> The Equipment are not in good repair as evidenced by torn sleeping mats. Regulation: 8.16.2.29A(1) <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: 11/19/2016	Non-compliance	
<b>8.16.2.29 B PEST CONTROL</b>	Compliance	
<b>8.16.2.29 C MECHANICAL SYSTEMS</b>	Compliance	
<b>8.16.2.29 D WATER AND WASTE</b>	Compliance	
<b>8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL</b>	Compliance	
<b>8.16.2.29 F EXITS AND WINDOWS</b> <u>Deficiencies</u> Exit ways are obstructed and do not permit free egress from inside the center to the outside in the Infant - (6 wk. - 12 mo.) classroom room(s). Window stuck Regulation: 8.16.2.29F(3) <u>Corrective Action Plan</u> Exit ways will be kept free from obstructions at all times. Date to be Completed: 11/19/2016	Non-compliance	
<b>8.16.2.29 G TOILET AND BATHING FACILITIES</b>	Compliance	
<b>8.16.2.29 H SAFETY COMPLIANCE</b>	Compliance	
<b>8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES</b>	Compliance	
<b>8.16.2.29 J PETS</b>	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.

MP

on file

01/05/2017

01/05/2017

Surveyor: Mark Prizzi

Date

Facility Rep: Danielle Wheeler

Date