



Facility

Name: *Bright Beginnings Child Development* **License Number:** *154984*
Address: *2302 Collins, Las Vegas, NM 87701*
Phone: *5054252715* **Fax:** **E-mail:**

License Information

Type: *3 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *07/04/2017* **Expiration Date:** *07/03/2018*

Capacity

Over Age 2: *80* **Under Age 2:** *24* **Night Care:** *0* **Playground:** *69*
Square Footage: *0*

Census

Over 2: *71* **Under 2:** *16*

Classrooms

Number of Classrooms: *7*

Days and Hours of Operation

Monday <i>7:30 AM - 5:30 PM</i>	Tuesday <i>7:30 AM - 5:30 PM</i>	Wednesday <i>7:30 AM - 5:30 PM</i>	Thursday <i>7:30 AM - 5:30 PM</i>	Friday <i>7:30 AM - 5:30 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *05/01/2018* **Time In:** *10:00 AM* **Time Out:** *12:00 PM* **Purpose:** *Annual*

Licensure

- 8.16.2.11 A Types of Licenses *Compliance*
- 8.16.2.11 B Renewal of License *Compliance*
- 8.16.2.11 D Non-transferable Restrictions of License *Compliance*
- 8.16.2.12 A, K, M Licensing Actions and Administrative Appeals *Compliance*
- 8.16.2.17 E, F Surveys for Child Care Facilities *Compliance*
- 8.16.2.18 D Complaints *Compliance*
- 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 *Compliance*

Administrative Requirements

8.16.2.22 A Administrative 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
8.16.2.22 E Children's Records	Compliance
8.16.2.22 F Personnel Records	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	Non-compliance

Educators did not complete the following training within 3-months: Health and Safety Training.

Corrective Action Plan

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: 05/31/2018

8.16.2.23 C Staff/Child Ratios and Group Sizes	Compliance
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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	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, Wadding and Water	Not Inspected
8.16.2.24 L Field Trips	Not Inspected

Food Service

8.16.2.25 B Meals and Snacks	Compliance
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Food Service (continued)

8.16.2.25 C Menus	Compliance
8.16.2.25 D Kitchens	Non-compliance

The refrigerator in the infant room does not have a working internal thermometer.

Corrective action Plan

The center will obtain and place a working thermometer in refrigerator.

Date to be Completed: 05/31/2018

8.16.2.25 E Meal Times	Compliance
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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
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	Non-compliance

The center failed to conduct an emergency preparedness practice drills for at least once a quarter.

Corrective Action Plan

A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year.

Date to be Completed: 05/31/2018

8.16.2.29 H Safety Compliance (continued)

Non-compliance

The center does not have verification of an annual fire inspection from the fire authority having jurisdiction.

Corrective Action Plan

An annual fire inspection will be requested from the fire authority having jurisdiction over the center.

Date to be Completed: 05/31/2018

The center failed to conduct a fire drill for the month(s) of March, April.

Date to be Completed: 05/31/2018

8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

Compliance

8.16.2.29 J Pets

Not Inspected

Additional Comments

None

Signatures

Please Note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans noted above, may result in further action taken against the licensee.



Surveyor: *Dion Ortega*

Facility Representative: *Alizza Gonzalez*

