



### Facility

**Name:** *Building Blocks Learning Center* **License Number:** *157415*  
**Address:** *301 West Reinken Ave, Belen, NM 87002*  
**Phone:** *5058646131* **Fax:**  **E-mail:** *n/a*

### License Information

**Type:** *3 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *06/01/2018* **Expiration Date:** *05/31/2019*

### Capacity

**Over Age 2:** *118* **Under Age 2:** *39* **Night Care:** *0* **Playground:** *70*  
**Square Footage:** *0*

### Census

**Over 2:** *38* **Under 2:** *10*

### Classrooms

**Number of Classrooms:** *6*

### Days and Hours of Operation

<b>Monday</b> <i>6:00 AM - 6:30 PM</i>	<b>Tuesday</b> <i>6:00 AM - 6:30 PM</i>	<b>Wednesday</b> <i>6:00 AM - 6:30 PM</i>	<b>Thursday</b> <i>6:00 AM - 6:30 PM</i>	<b>Friday</b> <i>6:00 AM - 6:30 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

### Inspection

**Date:** *09/20/2018* **Time In:** *9:30 AM* **Time Out:** *12:30 PM* **Purpose:** *Semi-Annual*

### Licensure

8.16.2.11 A Types of Licenses	<i>Not Inspected</i>
8.16.2.11 B Renewal of License	<i>Not Inspected</i>
8.16.2.11 D Non-transferable Restrictions of License	<i>Not Inspected</i>
8.16.2.12 A, K, M Licensing Actions and Administrative Appeals	<i>Not Inspected</i>
8.16.2.17 E, F Surveys for Child Care Facilities	<i>Not Inspected</i>
8.16.2.18 D Complaints	<i>Not Inspected</i>
8.16.2.21 A Licensing Requirements	<i>Compliance</i>

**Licensure (continued)****8.16.2.21 B Capacity of Centers****Non-compliance**

*The center failed to post **classroom capacities**, and ratios and group sizes in an area of the room that is easily visible to parents, staff and visitors. Some classrooms did not have the correct capacity posted for that classroom.*

*Corrective Action Plan*

*The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors.*

Regulation: 8.16.2.21.B.3.c.

Date to be Completed: 10/20/2018

**8.16.2.21 C Incident Reporting Requirements***Not Inspected***Administrative Requirements****8.16.2.22 A Administrative Records***Compliance***8.16.2.22 B Mission, Philosophy and Curriculum Statement***Not Inspected***8.16.2.22 C Policy and Procedures***Not Inspected***8.16.2.22 D Family Handbook***Not Inspected***8.16.2.22 E Children's Records***Compliance***8.16.2.22 F Personnel Records****Non-compliance**

*From the review of staff records, it was determined that 1 out of 8 staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.22 form for staff with this missing information.*

*Corrective Action Plan*

*The center will add staff's current and past duties and responsibilities to the record.*

Regulation: 8.16.2.22.F.1.c.

Date to be Completed: 10/20/2018

*From the review of staff records, it was determined that 1 out of 8 staff records does/do not include dates of hire and termination. See Staff Records 8.16.2.22 form for staff with this missing information.*

*Corrective Action Plan*

*The center will add dates of hire and termination to the record.*

Regulation: 8.16.2.22.F.1.d.

Date to be Completed: 10/20/2018

8.16.2.22 F Personnel Records *(continued)***Non-compliance**

*The center failed to have 2 out of 8 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.*

*Corrective Action Plan*

*The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction.*

Regulation: 8.16.2.22.F.1.f.

Date to be Completed: 10/20/2018

*From the review of staff records, it was determined that 1 out of 8 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.*

*Corrective Action Plan*

*The center will have staff complete the required acknowledgement and will retain on file.*

Regulation: 8.16.2.22.F.1.o.

Date to be Completed: 10/20/2018

*From the review of staff records, it was determined that 2 out of 8 staff records does/do not include a professional development plan based on seven areas of competency. See Staff Records 8.16.2.22 form for staff who need a current plan.*

*Corrective Action Plan*

*The center will have staff complete a professional development plan and sign the plan . The plan will be maintained on file.*

Regulation: 8.16.2.22.F.1.n.

Date to be Completed: 10/20/2018

## 8.16.2.22 G Personnel Handbook

*Not Inspected***Personnel & Staffing**

## 8.16.2.23 A Personnel and Staffing Requirements

*Compliance*

**Personnel & Staffing (continued)**

## 8.16.2.23 B Staff Qualifications and Training

**Non-compliance**

*From the review of staff records, it was determined that 1 out of 8 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation. Form was in file but not filled out*

*Corrective Action Plan*

*Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children.*

Regulation: 8.16.2.23.B.2.a.

Date to be Completed: 10/20/2018

## 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

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

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

**Food Service (continued)**

## 8.16.2.25 D Kitchens

**Non-compliance**

*The chest freezer in the kitchen, and 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 freezer.*

Regulation: 8.16.2.25.D.6.

Date to be Completed: 10/20/2018

## 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

Not Inspected

**Buildings, Grounds & Safety**

## 8.16.2.29 A Housekeeping

**Non-compliance**

*The Equipment are not in good repair as evidenced by broken mini blinds in the infant room, director has attempted to purchase new ones but store did not have them in stock.*

*Corrective Action Plan*

*Repairs will be completed and a system for routine inspection of the center and premises will be established.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 10/20/2018

*The Equipment are not in good repair as evidenced by torn sleeping mats in several classrooms.*

*Corrective Action Plan*

*Repairs will be completed and a system for routine inspection of the center and premises will be established.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 10/20/2018

**8.16.2.29 A Housekeeping (continued)****Non-compliance**

*The toys in the 2's classroom are not safe in that some of the springs on the bouncy horse are exposed.*

*Corrective Action Plan*

*The safety violation will be corrected and a system for routine safety inspection developed.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 10/20/2018

**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**

*The center does not have emergency lighting that turns on automatically when electrical service is disrupted. Emergency lighting at numerous exit signs did not turn on when tested.*

*Corrective Action Plan*

*Emergency lighting will be installed.*

Regulation: 8.16.2.29.E.2.

Date to be Completed: 10/20/2018

**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.*

Regulation: 8.16.2.29.H.1.

Date to be Completed: 10/20/2018

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

Compliance

**8.16.2.29 J Pets****Non-compliance**

*The center failed to inform parents or guardians before a pet was allowed in the center.*

*Corrective Action Plan*

*The center will inform parents or guardians in writing before pets are allowed in the center.*

Regulation: 8.16.2.29.J.1.

Date to be Completed: 10/20/2018

## Additional Comments

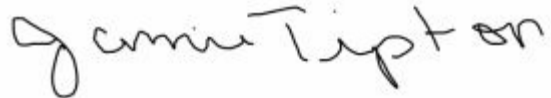
None

## 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: *Mark Prizzi*



Facility Representative: *Jamie Tipton*