

Center Name: Building Blocks Learning Center		Address: 301 West Reinken Ave Belen, NM 87002			Phone: (505)864-6131		
License Number: 157415	Issue Date: 02/1/2017	Expiration Date: 05/31/2017	Type: 3 Star FOCUS Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	115	Under Age 2:	38	Night Care:	0	Playground:	70
		Over 2:	22	Under 2:	7		
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:	06:00 AM	06:00 AM	06:00 AM	06:00 AM	06:00 AM	Closed	Closed
Closing Times:	06:30 PM	06:30 PM	06:30 PM	06:30 PM	06:30 PM		
# of Classrooms: 6	Purpose: Annual		Date: 03/22/2017		Time: 09:00 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	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 <u>Deficiencies</u> The licensee did not obtain background checks on all staff members , educators, volunteers, and prospective staff as per the requirements outlined in the department's most current version of the Background Check and Employment History Verification provisions . 1 out of 11 staff are not background checked every 5 years Regulation: 8.16.2.21A(2) <u>Corrective Action Plan</u> The licensee will obtain background checks on all staff members , volunteers, and prospective staff. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC at least once every five years on all required individuals. Date to be Completed: 04/22/2017	Non-compliance
8.16.2.21 B CAPACITY OF CENTERS	Non-compliance

Center Name: Building Blocks Learning Center	License Number: 157415	Date: 03/22/2017
Licensure		
<p><u>Deficiencies</u> 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. The 1's and school age rooms do not have capacities and ratios posted. All classrooms do not have maximum group size posted Regulation: 8.16.2.21B(3)(c)</p> <p><u>Corrective Action Plan</u> The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors. Date to be Completed: 04/22/2017</p>		
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected	
Administrative Requirements		
<p>8.16.2.22 A ADMINISTRATION RECORDS</p> <p><u>Deficiencies</u> The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent licensing survey; most recent fire inspection report. Regulation: 8.16.2.22A</p> <p><u>Corrective Action Plan</u> The center will post the missing item. Date to be Completed: 04/22/2017</p>	Non-compliance	
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance	
<p>8.16.2.22 C POLICY AND PROCEDURES</p> <p><u>Deficiencies</u> The center did not have available for review written policies and procedures covering expulsion of children. Regulation: 8.16.2.22C(1)-(8)</p> <p><u>Corrective Action Plan</u> The center will complete written policies and procedures for the missing area(s). Date to be Completed: 04/22/2017</p> <p><u>Deficiencies</u> (1) The program does not have an up to date emergency evacuation and disaster preparedness plan approved by the department which shall include steps for evacuation, relocation, shelter in place lock-down, communication, reunification with parents, individual plans for children with special needs and children with chronic medical conditions, accommodations of infants and toddlers and continuity of operations Regulation: 8.16.2.22C(8)</p> <p><u>Corrective Action Plan</u> An emergency evacuation and disaster preparedness plan will be developed. Date to be Completed: 04/22/2017</p>	Non-compliance	
8.16.2.22 D FAMILY HANDBOOK	Compliance	
8.16.2.22 E CHILDREN'S RECORDS	Non-compliance	

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Administrative Requirements

Deficiencies

Of the 10 children's records reviewed, 2 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.22 form for the child(ren) with no immunization/exemption.

Regulation: 8.16.2.22E(1)(e)

Corrective Action Plan

Parents will be advised to submit a complete and up-to-date immunization record or exemption. The center will review all children's records to ensure complete information is on file.

Date to be Completed: 04/22/2017

Deficiencies

Of the 10 children's records reviewed, 1 is/are missing a document giving the center permission to transport the child in a medical emergency and authorization for medical treatment signed by a parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Regulation: 8.16.2.22E(2)(d)

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure emergency medical transportation and treatment authorization is on file.

Date to be Completed: 04/22/2017

8.16.2.22 F PERSONNEL RECORDS

Non-compliance

Deficiencies

From the review of staff records, it was determined that 2 out of 11 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.

Regulation: 8.16.2.22F(1)(c)

Corrective Action Plan

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

Date to be Completed: 04/22/2017

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

Deficiencies

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.

Regulation: 8.16.2.23B(2)(c)

Corrective Action Plan

Training will be completed for staff as required and documentation retained on file.

Date to be Completed: 04/22/2017

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Personnel & Staffing

Deficiencies

Educators did not complete the following training within 3-months: CPR Training

Regulation: 8.16.2.23B(2)(b)

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: 04/22/2017

8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES

Non-compliance

Deficiencies

The center groups children by age. The required staff/child ratio for the Age in group: infants - 1:6 or fraction of group thereof. The observed staff/child ratio was 7 children to 1 staff.

Regulation: 8.16.2.23C(1)

Corrective Action Plan

Required staff/child ratios will be met at all times.

Date to be Completed: 04/22/2017

Deficiencies

The center failed to post the capacity for each activity/interest area. 6 out of 6 classrooms failed to post the capacity for each activity/interest area.

Regulation: 8.16.2.23 C (2)(b)

Corrective Action Plan

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

Date to be Completed: 04/22/2017

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

Non-compliance

Deficiencies

The playground equipment isn't inspected weekly.

Regulation: 8.16.2.24J(4)

Corrective Action Plan

The facility will hold weekly inspections of their playground equipment.

Date to be Completed: 04/22/2017

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Services & Care of Children		
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 Deficiencies A food is not properly stored; the item is not wrapped. Gold fish crackers in a cubby in the 1's room Regulation: 8.16.2.25D(4) Corrective Action Plan The person responsible for food service will be instructed in proper food storage. Date to be Completed: 04/22/2017		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 Deficiencies The center's first aid kit does not contain Gauze pads; Adhesive tape. Regulation: 8.16.2.26B(2) Corrective Action Plan Missing items will be added to the first-aid kit; staff will be reminded to replace any item used. Date to be Completed: 04/22/2017		Non-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
Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING Deficiencies The first aid kit has a heavy accumulation of soap spilled inside first aid container. Regulation: 8.16.2.29A(1) Corrective Action Plan A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards. Date to be Completed: 04/22/2017		Non-compliance

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Buildings, Grounds & Safety

Deficiencies

The Premises are not in good repair as evidenced by exit door in 4/5's room would not close properly.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

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

Date to be Completed: 04/22/2017

Deficiencies

The Toys are not in good repair as evidenced by cabinet in the school age home living is broken.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

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

Date to be Completed: 04/22/2017

Deficiencies

The premises in the classrooms are not safe in that mini blind cords are too low and accessible to children.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

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

Date to be Completed: 04/22/2017

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 <u>Deficiencies</u> The center does not have emergency lighting that turns on automatically when electrical service is disrupted. Emergency light in the 2's near the cots did not work when tested. Regulation: 8.16.2.29E(2) <u>Corrective Action Plan</u> Emergency lighting will be installed. Date to be Completed: 04/22/2017 <u>Deficiencies</u> Electrical outlets within reach of children in the 1's room are not safety outlets and they do not have protective covers. Regulation: 8.16.2.29E(3)(b) <u>Corrective Action Plan</u> Protective covers will be added. Date to be Completed: 04/22/2017	Non-compliance
8.16.2.29 F EXITS AND WINDOWS	Non-compliance

Center Name: Building Blocks Learning Center	License Number: 157415	Date: 03/22/2017
Buildings, Grounds & Safety		
Deficiencies Exit ways are obstructed and do not permit free egress from inside the center to the outside in the Infant - (6 wk. - 12 mo.); School Age class room(s). Window exits in both classrooms were stuck, hard to open Regulation: 8.16.2.29F(3)		
Corrective Action Plan Exit ways will be kept free from obstructions at all times. Date to be Completed: 04/22/2017		
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, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.29 J PETS		Compliance

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 1200

03/22/2017

Jamie Tipton

03/22/2017

Surveyor: Mark Prizzi	Date	Facility Rep: Jamie Tipton	Date
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