

Center Name:			Address:					Phone:				
Building Bridges Child Development			2400 Bridge S.W Albuquerque, NM 87105					(505)243-6639				
License Number:	Issue Date:	Expiration I	piration Date: Type: Status:				•					
128713	06/5/2017	06/4/2018	3 Star FOCUS Child Care Center Licensed									
Capacity			,	<u>-</u>			Cer	nsus				
Over Age 2: 170	Under Age 2:	15 Night	Care:	0 F	Playground:	30	Ove	er 2:	51	Und	er 2:	12
Days and Hours of 0	Operation					-						
	<u>Monday</u>	<u>Tuesda</u>	<u>y</u> <u>W</u>	<u>ednesday</u>	Thurso	<u>lay</u>	Fri	<u>day</u>	<u>S</u>	<u>aturday</u>		<u>Sunday</u>
Opening Times:	06:00 AM	06:00 A	vi (	06:00 AM	06:00 A	AM	06:00 AM		Closed			Closed
Closing Times:	Closing Times: 07:00 PM 07:00 PM		M (	07:00 PM	00 PM 07:00 PM 07		07:0	0 PM				
# of Classrooms:	F	Purpose:			Date:				Time	e:		
7 Semi-Annual			11/07/2017				10:00 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	Not Inspected			
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	Compliance			
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected			
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	Non-compliance			

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# **Administrative Requirements**

#### **Deficiencies**

Of the 16 children's records reviewed, 2is/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: 12/07/2017

# 8.16.2.22 F PERSONNEL RECORDS

Deficiencies

From the review of staff records, it was determined that 4 out of 4 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.

**Regulation:** 8.16.2.22F(1)(n)

### **Corrective Action Plan**

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

Date to be Completed: 12/08/2017

### 8.16.2.22 G PERSONNEL HANDBOOK

Not Inspected

Non-compliance

# Personnel & Staffing

# 8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS

Compliance
Non-compliance

#### 8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING

#### **Deficiencies**

From the review of staff records, it was determined that 1 out of 4 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: 12/08/2017

# **Deficiencies**

Educators did not complete the following training within 3-months: Health and Safety Training (1)

**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: 12/07/2017

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# **Personnel & Staffing**

# **Deficiencies**

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

**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: 12/07/2017

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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	Not Inspected			
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	Not Inspected			
8.16.2.24 I EQUIPMENT AND PROGRAM  Deficiencies The center does not provide children in the2 yr. room(s) sufficient equipment; materials for indoor activities so that at any one time each child can be individually involved. empty sensory table Regulation: 8.16.2.24I(4)  Corrective Action Plan Additional materials will be obtained. Date to be Completed: 12/08/2017  8.16.2.24 J OUTDOOR PLAY AREAS  8.16.2.24 K SWIMMING, WADING AND WATER	Compliance  Compliance  Not Inspected  Not Inspected			
Food Service				
8.16.2.25 B MEALS AND SNACKS	Compliance			
8.16.2.25 C MENUS	Non-compliance			

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### **Food Service**

### **Deficiencies**

The posted menu was not followed and the substitution(s) was not recorded on the posted menu.

**Regulation:** 8.16.2.25C(2)

#### **Corrective Action Plan**

When the posted menu is not followed, substitutions will meet nutritional requirements and be recorded on the posted menu.

Date to be Completed: 11/02/2017

8.16.2.25 D KITCHENS	Non-compliance
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# **Deficiencies**

A food; leftover is not properly stored; the item is not labeled and dated. a pitcher full of leftover food

**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: 12/07/2017

#### 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	Not Inspected
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS	Not Inspected
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS	Not Inspected

# **Buildings, Grounds & Safety**

### 8.16.2.29 A HOUSEKEEPING Non-compliance

# **Deficiencies**

The floors in the 3s bathroom are not clean as evidenced by unclean floors and baseboards.

**Regulation:** 8.16.2.29A(1)

# **Corrective Action Plan**

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 12/07/2017

#### **Deficiencies**

The premises in the ones room are not safe in that 3 highchairs are missing seat belts.

**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: 12/07/2017

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# **Buildings, Grounds & Safety**

#### **Deficiencies**

The Ceiling tiles are not in good repair as evidenced by stained in rooms 2s, 3s, and SA.

**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: 12/08/2017

### **Deficiencies**

The Fixtures are not in good repair as evidenced by one light panel out in the PKA bathroom.

**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: 12/01/2017

### **Deficiencies**

The Equipment are not in good repair as evidenced by a very broken and frayed bouncer in the infant room.

**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: 12/01/2017

# **Deficiencies**

The premises in the PKB are not safe in that purses are accessible to the 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: 12/07/2017

# **Deficiencies**

The toys; equipment in the 2s are not clean as evidenced by the whole dramatic play area is not clean or disinfected.

**Regulation:** 8.16.2.29A(1)

### **Corrective Action Plan**

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 12/07/2017

# **Deficiencies**

The premises; furniture; fixtures; floors; toys; equipment; tables; chairs in the SA are not clean as evidenced by everything in the classroom needs to be cleaned/disinfected.

**Regulation:** 8.16.2.29A(1)

# **Corrective Action Plan**

Cleaning will be completed and a schedule for routine cleaning will be established.

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# **Buildings, Grounds & Safety**

# **Deficiencies**

The floors in the 2s are not clean as evidenced by unclean rugs.

**Regulation:** 8.16.2.29A(1)

# **Corrective Action Plan**

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 12/07/2017

### **Deficiencies**

The floors/ carpeting in all carpeted areas are stained, unclean

**Regulation:** 8.16.2.29A(1)

# **Corrective Action Plan**

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 12/08/2017

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	Non-compliance
<u>Deficiencies</u>	
Electrical outlets within reach of children in the PKB and SA room are not safety outlets	
and they do not have protective covers.	
<b>Regulation:</b> 8.16.2.29E(3)(b)	
Corrective Action Plan	
Protective covers will be added.	
Date to be Completed: 12/07/2017	
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	Compliance
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.29 J PETS	Compliance
	-1

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.

11/07/2017

11/07/2017

Surveyor:Sylvia Foster

Date

Facility Rep:Rosemary Martinez

Date