

Center Name: CABQ Alamosa Child Development Center			Address: 6900 Gonzales S.W. Suite A Albuquerque, NM 87121					Phone: (505)836-8764		
License Number:	Issue Date:	Expiration [Date:	Type: Status:			s:	-		
99909	07/29/2017	07/28/2018		5 Star FOCUS Child Care Center Licensed			sed			
Capacity						1	Census			
Over Age 2: 40	Under Age 2:	0 Night	Care:	0 PI	ayground:	40	Over 2:	7	Unde	r 2: 0
Days and Hours of Operation										
Opening Times: Closing Times:		<u>Tuesda</u> 07:00 AN 05:30 PN	<u> </u>	ednesda <u>y</u> 07:00 AM 05:30 PM	<u>Thursday</u> 07:00 AM 05:30 PM	0	<u>Friday</u> 7:00 AM 5:30 PM	_	<u>Saturday</u> Closed	<u>Sunday</u> Closed
# of Classrooms:	F	Purpose: semi-Annual			Date: 12/08/2017			Tim 08:3	ie: 80 AM	
Comments Fire extinguishers ex	unica Maur 2010				1					

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Background check eligibility for one staff will need to be renewed before 6/13/18.

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	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	Compliance			
8.16.2.22 G PERSONNEL HANDBOOK	Not Inspected			
Personnel & Staffing				
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance			
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING	Non-compliance			

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Center Name:	License Number:	Date:	
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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: 2

Date to be Completed: 01/08/2018

	<u> </u>
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	N/A
8.16.2.24 D DIAPERING AND TOILETING	N/A
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	Compliance
8.16.2.24 J OUTDOOR PLAY AREAS	Compliance
8.16.2.24 K SWIMMING, WADING AND WATER	Not Inspected
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	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	Non-compliance
<u>Deficiencies</u>	
The center does not have on duty all educators currently certified in first aid and	
cardiopulmonary resuscitation (CPR).	
Regulation: 8.16.2.26B(1)	
Corrective Action Plan	
All educators must be certified in first aid and cardiopulmonary resuscitation (CPR).	
Date to be Completed: 01/08/2018	
8.16.2.26 C MEDICATION	Compliance

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Center Name:	License Number:	Date: 12/08/2017		
CABQ Alamosa Child Development Center		12/06/2017		
	afety Requirements			
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS			Not Inspected	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS			N/A	
Buildings,	Grounds & Safety			
8.16.2.29 A HOUSEKEEPING			Non-compliance	
<u>Deficiencies</u>				
The Ceiling tiles are not in good repair as evidenced by damag	ed.14			
Regulation: 8.16.2.29A(1)				
Corrective Action Plan				
Repairs will be completed and a system for routine inspection of	of the center and premises			
will be established. Date to be Completed: 01/08/2018				
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			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	
<u>Deficiencies</u>				
The center failed to conduct a fire drill for the month(s) of Nove Regulation: 8.16.2.29H(2)	mber 2017			
Corrective Action Plan A monthly fire drill will be held and recorded.				
Date to be Completed: 12/15/2017				
<u>Deficiencies</u>				
The center does not have verification of an annual fire inspection	on from the fire authority			
having jurisdiction.expired 11/8/17	•			
Regulation: 8.16.2.29H(3)(e)				
Corrective Action Plan				
An annual fire inspection will be requested from the fire authori	ty having jurisdiction over the			
center.				
Date to be Completed: 01/08/2018				
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGA	L DRUGS AND CONTROLLED SUBS	TANCES	Compliance	
8.16.2.29 J PETS			N/A	

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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.

SF 920

12/08/2017

m file

12/08/2017

Surveyor:Sylvia Foster

Date

Facility Rep:Monica Santistevan

Date