

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:			Address:				Р	Phone:		
CABQ Carlos Rey Child Development Ctr		r	1310 Delgado Dr SW Albuquerque, NM 87121			(5	(505)836-8704			
License Number:	Issue Date:	Expiration I	Date:	Туре:			Status:			
91241	04/30/2016	04/29/2017		5 Star FOC	US Child Care Center		Licensed			
Capacity							nsus			
Over Age 2: 43	Under Age 2:	0 Night	Care:	0 Pl	layground: 43	Ove	er 2:	17	Unde	er 2: 0
Days and Hours of	-									
Opening Times	Monday 07:00 AM		-	<u>ednesday</u> 07:00 AM	<u>Thursday</u> 07:00 AM		<u>day</u> 10 AM		<u>urday</u> osed	<u>Sunday</u> Closed
Closing Times				05:30 PM	05:30 PM		0 PM	U.C.		0.0004
# of Classrooms:		Purpose:			Date:			Time:		
2		Annual			03/02/2017			10:30 A	M	
Comments center has complied	with the manda	tony H & S training	n this was d	done 10/1/16	3					
		-	-							
A SUR	/EY OF YOUR FAC	ILITY HAS BEEN MA	DE AND YOU	ARE NOTIFIE	D OF NON-COMPLIANCE	OF THE	EREGULATIO	ONS AS N	IOTED BEL	.OW:
				Licer	nsure					
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		
			Admi	nistrative	Requirements					
8.16.2.22 A ADMINI	STRATION REC	ORDS								Compliance
8.16.2.22 B MISSIO	N, PHILOSOPH	Y AND CURRICUL	UM STATE	MENT						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			

Center Name:	License Number:	Date:			
CABQ Carlos Rey Child Development Ctr	91241	03/02/2017			
Administrative Red	quirements	I			
Deficiencies From the review of staff records, it was determined that 2 out of 4 staff reinclude a background check. See Staff Records 8.16.2.22 form for staff information. Older than 5 years Regulation: 8.16.2.22F(1)(e) Corrective Action Plan The center will obtain documentation of a background check. Date to be Completed: 04/03/2017 Deficiencies From the review of staff records, it was determined that 3 out of 4 staff reinclude a professional development plan based on seven areas of completed: 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 plan will be maintained on file. Date to be Completed: 04/03/2017	with this missing ecords does/do not etency. See Staff				
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		Compliance			
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES		Non-compliance			
Deficiencies The center failed to post the capacity for each activity/interest area. 1 out 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 a activity and size of the space, and will not exceed the group size require Paragraph (1) of Subsection C of 8.16.2.23 NMAC	according to the				
Date to be Completed: 04/03/2017					
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		N/A			
8.16.2.24 D DIAPERING AND TOILETING	N/A				
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEE	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	Compliance				
8.16.2.24 I EQUIPMENT AND PROGRAM		Compliance			
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Ser	vices & Care of Children	
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
Heal	th & 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		Not Inspected
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CEN	TERS	N/A
Buil	ldings, Grounds & Safety	
8.16.2.29 A HOUSEKEEPING		Non-compliance
Deficiencies		
The premises in the outside learning area are not clean	as evidenced by weeds.	
Regulation: 8.16.2.29A(1) <u>Corrective Action Plan</u>		
Cleaning will be completed and a schedule for routine c	leaning will be established.	
Date to be Completed: 04/03/2017		
Deficiencies		
The premises in the outside learning area are not safe i hazard to the children.	in that a nose presents a tripping	
Regulation: 8.16.2.29A(1)		
Corrective Action Plan		
The safety violation will be corrected and a system for re Date to be Completed: 03/02/2017	outine safety inspection developed.	
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 ELECTRICA	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	Compliance	
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES,	· · · · ·	
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Buildings, Grounds & Safety									
8.16.2.29 J PETS	,		N/A						
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.									
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61-01	\sim $1 / $	1.0							
5F12 (zonfilh	n							
03/02/2017		•	03/02/2017						

Facility Rep:Gayle Rhea

Date

Surveyor:Sylvia Foster

Survey Report Form

Date