



Facility

Name: *Camp Fire USA @ Monte Vista Elementary*

License Number: *164293*

Address: *3211 Monte Vista Blvd, Albuquerque, NM 87106*

Phone: *5053637492*

Fax:

E-mail: *dheckler@campfireabq.org*

License Information

Type: *2 Star Child Care Center*

Status: *Licensed*

Issue Date: *03/15/2018*

Expiration Date:
03/14/2019

Capacity

Over Age 2: *81*

Under Age 2: *0*

Night Care: *0*

Playground: *81*

Square Footage: *0*

Census

Over 2: *38*

Under 2: *0*

Classrooms

Number of Classrooms: *1*

Days and Hours of Operation - Morning

Monday

7:30 AM - 8:30 AM

Tuesday

7:30 AM - 8:30 AM

Wednesday

7:30 AM - 8:30 AM

Thursday

7:30 AM - 8:30 AM

Friday

7:30 AM - 8:30 AM

Saturday

Closed

Sunday

Closed

Days and Hours of Operation - Afternoon

Monday

3:50 PM - 6:00 PM

Tuesday

3:50 PM - 6:00 PM

Wednesday

12:40 PM - 6:00 PM

Thursday

3:50 PM - 6:00 PM

Friday

3:50 PM - 6:00 PM

Saturday

Closed

Sunday

Closed

Inspection

Date: *01/16/2019*

Time In: *1:30 PM*

Time Out: *2:30 PM*

Purpose: *Annual*

Licensure

8.16.2.40 A Licensing Requirements

Not Inspected

8.16.2.40 B Capacity of a Program

Compliance

8.16.2.40 C,D Incident Reporting Requirements

Not Inspected

Administrative Requirements

8.16.2.41 A Administrative Records	Compliance
8.16.2.41 B Mission, Philosophy and Curriculum Statement	Compliance
8.16.2.41 C Parent Handbook	Compliance
8.16.2.41 D Children's Records	Compliance
8.16.2.41 E Personnel Records	Non-compliance

From the review of staff records, it was determined that 1 out of 5 staff records does/do not include the staff's position. See Staff Records 8.16.2.41 form for staff with this missing information.

Corrective Action Plan

The program will add the position to the record.

Regulation: 8.16.2.41.E.1.b.

Date to be Completed: 02/15/2019

From the review of staff records, it was determined that 1 out of 5 staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.41 form for staff with this missing information.

Corrective Action Plan

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

Regulation: 8.16.2.41.E.1.c.

Date to be Completed: 02/15/2019

From the review of staff records, it was determined that 1 out of 5 staff records does/do not include dates of hire and termination. See Staff Records 8.16.2.41 form for staff with this missing information.

Corrective Action Plan

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

Regulation: 8.16.2.41.E.1.d.

Date to be Completed: 02/15/2019

The center failed to have 1 out of 5 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.

Corrective Action Plan

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

Regulation: 8.16.2.41.E.1.f.

Date to be Completed: 02/15/2019

8.16.2.41 E Personnel Records (continued)**Non-compliance**

From the review of staff records, it was determined that 2 out of 5 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.41 form for staff with missing documentation.

Corrective Action Plan

The program will obtain verification of all training and retain on file.

Regulation: 8.16.2.41.E.1.h.

Date to be Completed: 02/15/2019

From the review of staff records, it was determined that 1 out of 4 staff records does/do not include an emergency contact number. See Staff Records 8.16.2.41 form for staff with this missing information.

Corrective Action Plan

The program will have staff complete required information.

Regulation: 8.16.2.41.E.1.i.

Date to be Completed: 02/15/2019

8.16.2.41 F Personnel Handbook**Compliance****Personnel & Staffing****8.16.2.42 A Personnel and Staffing Requirements****Compliance****8.16.2.42 B Staff Qualifications****Compliance****8.16.2.42 C Training****Non-compliance**

From the review of staff records, it was determined that 1 out of 5 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.42 form for staff with missing documentation.

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: 8.16.2.42.C.1.

Date to be Completed: 02/15/2019

Current educators did not complete the Health and Safety Training training within three (3) months of their date of hire.

Corrective Action Plan

All educators, regardless of the number of hours per week, will complete the above listed training.

Regulation: 8.16.2.42.C.2.

Date to be Completed: 02/15/2019

Services & Care of Children

8.16.2.43 A Guidance

Non-compliance

Of the 5 staff records reviewed, 1 is/are missing a signed staff acknowledgement that the guidance policy had been read and understood. See the Children's Records 8.16.2.41 form for the child(ren) who have this missing.

Corrective Action Plan

All staff's records will be reviewed to ensure a signed staff acknowledgement is on file.

Regulation: 8.16.2.43.A.1.

Date to be Completed: 02/15/2019

8.16.2.43 B Physical Environment

Compliance

8.16.2.43 C Social-Emotional Responsive Environment

Compliance

8.16.2.43 D Equipment and Program

Compliance

8.16.2.43 E Additional Requirements for Children with Special Needs

Compliance

8.16.2.43 F Outdoor Play Areas

Compliance

8.16.2.43 G Swimming, Wading and Water

Not Inspected

8.16.2.43 H Field Trips

Not Inspected

Food Service

8.16.2.44 B Meals and Snacks

Compliance

8.16.2.44 C Kitchens

Compliance

Health & Safety Requirements

8.16.2.45 A Hygiene

Compliance

8.16.2.45 B First Aid Requirements

Compliance

8.16.2.45 C Medication

Not Inspected

8.16.2.45 D Illnesses

Compliance

8.16.2.46 A-H Transportation Requirements

Not Inspected

Buildings, Grounds & Safety

8.16.2.47 A Housekeeping

Compliance

8.16.2.47 B Pest Control

Compliance

8.16.2.47 C Mechanical Systems

Compliance

8.16.2.47 D Lighting, Lighting Fixtures and Electrical

Compliance

Buildings, Grounds & Safety (continued)

8.16.2.47 E Exits and Windows

Compliance

8.16.2.47 F Toilet and Bathing Facilities:

Compliance

8.16.2.47 G Safety Compliance:

Non-compliance

The program did not conduct emergency preparedness practice drills at least quarterly beginning of each school calendar year.

Corrective Action Plan

A quarterly emergency preparedness practice drill will be held and recorded. CORRECTED ON SITE.

Regulation: 8.16.2.47.G.1.

Date to be Completed: 02/15/2019

8.16.2.47 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

Compliance

8.16.2.47 I Pets

Compliance

Additional Comments

Emergency drill conducted during inspection.

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: Patricia Williams



Facility Representative: Jessica Wheat Rosalie Esquivel