



Facility

Name: *Central Family YMCA* License Number: *152356*
 Address: *201 University NE, Albuquerque, NM 87106*
 Phone: *5058814787* Fax: *N/A* E-mail: *mdrake@ymcacnm.org*

License Information

Type: *3 Star FOCUS Child Care Center* Status: *Licensed* Issue Date: *05/27/2017* Expiration Date: *05/26/2018*

Capacity

Over Age 2: *39* Under Age 2: *25* Night Care: *0* Playground: *62*
 Square Footage: *0*

Census

Over 2: *23* Under 2: *15*

Classrooms

Number of Classrooms: *5*

Days and Hours of Operation

Monday <i>7:00 AM - 6:00 PM</i>	Tuesday <i>7:00 AM - 6:00 PM</i>	Wednesday <i>7:00 AM - 6:00 PM</i>	Thursday <i>7:00 AM - 6:00 PM</i>	Friday <i>7:00 AM - 7:00 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *03/27/2018* Time In: *10:15 AM* Time Out: *1:20 PM* Purpose: *Annual*

Licensure

8.16.2.11 A Types of Licenses **Non-compliance**

The child care facility failed to submit a new application to the licensing authority before modifying information required to be stated on the license as follows: capacity

Corrective Action Plan
A notarized renewal application will be completed and submitted with the required fee prior to any changes being made to the current license.

Date to be Completed: *04/26/2018*

8.16.2.11 B Renewal of License *Not Inspected*

8.16.2.11 D Non-transferable Restrictions of License *Not Inspected*

Licensure (*continued*)

8.16.2.12 A, K, M Licensing Actions and Administrative Appeals	<i>Not Inspected</i>
8.16.2.17 E, F Surveys for Child Care Facilities	<i>Not Inspected</i>
8.16.2.18 D Complaints	<i>Not Inspected</i>
8.16.2.21 A Licensing Requirements	<i>Not Inspected</i>
8.16.2.21 B Capacity of Centers	<i>Compliance</i>
8.16.2.21 C Incident Reporting Requirements	<i>Not Inspected</i>

Administrative Requirements

8.16.2.22 A Administrative Records	<i>Compliance</i>
8.16.2.22 B Mission, Philosophy and Curriculum Statement	<i>Compliance</i>
8.16.2.22 C Policy and Procedures	<i>Compliance</i>
8.16.2.22 D Family Handbook	<i>Compliance</i>
8.16.2.22 E Children's Records	<i>Compliance</i>
8.16.2.22 F Personnel Records	<i>Non-compliance</i>

From the review of staff records, it was determined that 2 out of 8 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will obtain documentation of a background check.

Date to be Completed: 04/27/2018

From the review of staff records, it was determined that 5 out of 8 staff records does/do not include documentation of current first-aid and cardiopulmonary resuscitation training. See Staff Records 8.16.2.22 form for staff without verification of training.

Corrective Action Plan

The center will obtain documentation of first-aid and CPR training and retain on file.

Date to be Completed: 04/27/2018

8.16.2.22 G Personnel Handbook	<i>Compliance</i>
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Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements	<i>Compliance</i>
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Personnel & Staffing *(continued)*

8.16.2.23 B Staff Qualifications and Training

Non-compliance

From the review of staff records, it was determined that 3 out of 8 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.

Corrective Action Plan

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

Date to be Completed: 03/27/2018

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

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: 04/27/2018

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

N/A

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

The playground equipment isn't inspected weekly.

Corrective Action Plan

The facility will hold weekly inspections of their playground equipment.

Date to be Completed: 04/27/2018

8.16.2.24 J Outdoor Play Areas *(continued)*

Non-compliance

The weekly playground equipment inspections are not documented correctly.

Corrective Action Plan
The facility will document their weekly playground inspections.

Date to be Completed: 04/27/2018

8.16.2.24 K Swimming, Wadding and Water

N/A

8.16.2.24 L Field Trips

N/A

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

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 Centers

N/A

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping

Non-compliance

The Toys are not in good repair as evidenced by classroom 121 has a play kitchenette that is in disrepair, and classroom 117 has a play sink that is missing the faucet

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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: 04/27/2018

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

Buildings, Grounds & Safety (continued)

8.16.2.29 G Toilet and Bathing Facilities

Compliance

8.16.2.29 H Safety Compliance

Non-compliance

*The center failed to conduct a fire drill for the month(s) of January, February, March.
Date to be Completed: 03/27/2018*

The center does not have verification of an annual fire inspection from the fire authority having jurisdiction.

Corrective Action Plan

An annual fire inspection will be requested from the fire authority having jurisdiction over the center.

Date to be Completed: 04/27/2018

8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

Compliance

8.16.2.29 J Pets

N/A

Additional Comments

The center is using a room that is not licensed. The room cannot be used until it has been approve by licensing.

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: Lucille Mizner



Facility Representative: Mickey Drake

