

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

| Center Name:<br>Children's Choice at Bandelier |                         |              | Address:<br>3309 Pershing SE<br>Albuquerque, NM 87106 |                                |                 |     |               |          | Phone:<br>(505)296-2880 |          |               |  |  |
|--|-------------------------|--------------|---|--------------------------------|-----------------|-----|---------------|----------|-------------------------|----------|---------------|--|--|
| License Number:                                | Issue Date:             | Expiration I | Date:   | Туре:                          |                 |     |               | Status:  |                         |          |               |  |  |
| 72674  | 08/17/2016              | 08/16/2017   |   | 5 Star FOCUS Child Care Center |                 |     |               | Licensed |                         |          |               |  |  |
| Capacity                                       |                         |              |   |                                | Cer             | sus |               |          |                         |          |               |  |  |
| Over Age 2: 111                                | Under Age 2:            | 0 Night      | Care:   | 0 Pla                          | ayground:       | 94  | Ove           | r 2:     | 2: 0 Under 2: 0         |          |               |  |  |
| Days and Hours of                              | Operation               |              |   |                                |                 | I   |               |          |                         |          |               |  |  |
| Morning  | Morning Monday          |              | <u>y W</u>  | /ednesday                      | <u>Thursday</u> |     | <u>Friday</u> |          | 5                       | Saturday | Sunday        |  |  |
| Opening Times                                  | Opening Times: 07:00 AM |              | N   | 07:00 AM                       | 07:00 AM        |     | 07:00 AM      |          |                         | Closed   | Closed        |  |  |
| Closing Times                                  | : 09:00 AM              | 09:00 AM     | N   | 09:00 AM                       | 09:00 AM        | (   | 09:0          | 9:00 AM  |                         |          |               |  |  |
| Afternoon Monday                               |                         | Tuesday      |   | /ednesday                      | Thursday        |     | <u>Friday</u> |          | 5                       | Saturday | <u>Sunday</u> |  |  |
| Opening Times: 03:10 PM                        |                         | 03:10 PI     | N   | 03:10 PM                       | 03:10 PM        |     | 03:10 PM      |          |                         |          |               |  |  |
| Closing Times                                  | : 06:00 PM              | 06:00 PI     | M O   | 06:00 PM                       | 06:00 PM        | (   | 06:0          | ) PM     |                         |          |               |  |  |
| # of Classrooms: Purpose:                      |                         |              |   | Date:                          |                 | Ti  |               | Tim      | me:                     |          |               |  |  |
| 1 Follow-up                                    |                         |              |   | 07/18/2017                     |                 |     | 08:43 AM      |          |                         |          |               |  |  |
| Comments                                       |                         |              |   |                                |                 |     |               |          |                         |          |               |  |  |

| A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE RE | GULATIONS AS NOTED BELOW: |
|--|---------------------------|
| Licensure  |                           |
| 8.16.2.40 A LICENSING REQUIREMENTS   | Not Inspected             |
| 8.16.2.40 B CAPACITY OF A PROGRAM  | Not Inspected             |
| 8.16.2.40 C, D INCIDENT REPORTING REQUIREMENTS   | Not Inspected             |
| Administrative Requirements  |                           |
| 8.16.2.41 A ADMINISTRATION RECORDS   | Not Inspected             |
| 8.16.2.41 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT                                 | Not Inspected             |
| 8.16.2.41 C PARENT HANDBOOK  | Not Inspected             |
| 8.16.2.41 D, 8.16.2.42 D CHILDREN'S RECORDS  | Not Inspected             |
| 8.16.2.41 E PERSONNEL RECORDS  | Not Inspected             |
| 8.16.2.41 F PERSONNEL HANDBOOK   | Not Inspected             |
| Personnel & Staffing   | ľ                         |
| 8.16.2.42 A PERSONNEL AND STAFFING REQUIREMENTS  | Not Inspected             |
| 8.16.2.42 B STAFF QUALIFICATIONS   | Not Inspected             |
| 8.16.2.42 C TRAINING   | Not Inspected             |
| Services & Care of Children  |                           |
| 8.16.2.43 A GUIDANCE   | Not Inspected             |
| 8.16.2.43 B PHYSICAL ENVIRONMENT   | Not Inspected             |
|  | Doro 1 of 2               |

Survey Report Form

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|--|--------------------------|---------------------|---------------|--|--|
| Serv   | ices & Care of Children  |                     |               |  |  |
| 8.16.2.43 C SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT    | ſ                        |                     | Not Inspected |  |  |
| 8.16.2.43 D EQUIPMENT AND PROGRAM                      |                          |                     | Not Inspected |  |  |
| 8.16.2.43 E ADDITIONAL REQUIREMENTS FOR CHILDREN WIT   | H SPECIAL NEEDS          |                     | Not Inspected |  |  |
| 8.16.2.43 G SWIMMING, WADING AND WATER                 |                          |                     | Not Inspected |  |  |
| 8.16.2.43 H FIELD TRIPS                                |                          |                     |               |  |  |
| 8.16.2.43 F OUTDOOR PLAY AREAS                         |                          | Not Inspected       |               |  |  |
|  | Food Service             |                     |               |  |  |
| 8.16.2.44 B MEALS AND SNACKS                           |                          |                     | Not Inspected |  |  |
| 8.16.2.44 C KITCHENS                                   |                          |                     | Compliance    |  |  |
| Health   | n & Safety Requirements  |                     |               |  |  |
| 8.16.2.45 A HYGIENE                                    |                          |                     | Not Inspected |  |  |
| 8.16.2.45 B FIRST AID REQUIREMENTS                     |                          |                     | Not Inspected |  |  |
| 8.16.2.45 C MEDICATION                                 |                          |                     | Not Inspected |  |  |
| 8.16.2.45 D ILLNESSES                                  |                          |                     | Not Inspected |  |  |
| 8.16.2.46 A-H TRANSPORTATION REQUIREMENTS              |                          | Not Inspected       |               |  |  |
| Build  | ings, Grounds & Safety   |                     |               |  |  |
| 8.16.2.47 A HOUSEKEEPING                               |                          |                     | Not Inspected |  |  |
| 8.16.2.47 B PEST CONTROL                               |                          |                     | Not Inspected |  |  |
| 8.16.2.47 C MECHANICAL SYSTEMS                         |                          | Not Inspected       |               |  |  |
| 8.16.2.47 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL |                          | Not Inspected       |               |  |  |
| 8.16.2.47 E EXITS AND WINDOWS                          |                          | Not Inspected       |               |  |  |
| 8.16.2.47 F TOILET AND BATHING FACILITIES              |                          | Not Inspected       |               |  |  |
| 8.16.2.47 G SAFETY COMPLIANCE                          |                          | Compliance          |               |  |  |
| 8.16.2.47 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES,    | STANCES                  | Not Inspected       |               |  |  |
| 8.16.2.47 G, I PETS                                    |                          |                     | Not Inspected |  |  |

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.

Signature on file

Facility Rep:Carmen Prince Morris

07/18/2017

Date

07/18/2017

Surveyor:Patricia Williams

Date