



Center Name: Discovery Child Development Ctr IV			Address: 107 Discovery Lane Anthony, NM 88021			Phone: (575)882-3700		
License Number: 143541	Issue Date: 04/20/2016	Expiration Date: 04/19/2017	Type: 5 Star FOCUS Child Care Center			Status: Licensed		
Capacity Over Age 2: 81 Under Age 2: 25 Night Care: 0 Playground: 222						Census Over 2: 33 Under 2: 6		
Days and Hours of Operation								
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>	
Opening Times:	06:00 AM	06:00 AM	06:00 AM	06:00 AM	06:00 AM	Closed	Closed	
Closing Times:	06:30 PM	06:30 PM	06:30 PM	06:30 PM	06:30 PM			
# of Classrooms: 8		Purpose: Annual		Date: 02/17/2017		Time: 01:40 PM		
Comments New regulations were reviewed with the Director.								

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

Licensure

8.16.2.11 A TYPES OF LICENSES	Compliance
8.16.2.11 B RENEWAL OF LICENSE	Compliance
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	Compliance
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	Compliance
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Compliance
8.16.2.18 D COMPLAINTS	Compliance
8.16.2.21 A LICENSING REQUIREMENTS	Compliance
8.16.2.21 B CAPACITY OF CENTERS <u>Deficiencies</u> The center failed to post classroom capacities, and ratios and group sizes in an area of the room that is easily visible to parents, staff and visitors. Group sizing incorrect or missing from all classrooms. Regulation: 8.16.2.21B(3)(c) <u>Corrective Action Plan</u> The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors. Date to be Completed: 03/17/2017	Non-compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Compliance
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	Non-compliance

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Administrative Requirements		
<p><u>Deficiencies</u> The center did not have available for review written policies and procedures covering expulsion of children. Regulation: 8.16.2.22C(1)-(8)</p> <p><u>Corrective Action Plan</u> The center will complete written policies and procedures for the missing area(s). Date to be Completed: 03/17/2017</p>		
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	
<p>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</p> <p><u>Deficiencies</u> Educators did not complete the following training within 3-months: Health and Safety Training; CPR Training 2 out of 3 missing Health and Safety Training, 2 out of 3 expired or missing first aid. Regulation: 8.16.2.23B(2)(b)</p> <p><u>Corrective Action Plan</u> 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: 03/17/2017</p>	Non-compliance	
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	
<p>8.16.2.24 D DIAPERING AND TOILETING</p> <p><u>Deficiencies</u> Diapers and diapering supplies are not labeled Wipes not labled in infant room. Regulation: 8.16.2.24D(3)</p> <p><u>Corrective Action Plan</u> Staff will ensure diapers and diapering supplies are labeled and properly stored . CORRECTED ON SITE. Date to be Completed: 02/17/2017</p>	Non-compliance	
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	

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Services & Care of Children		
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 <u>Deficiencies</u> The fall zone underneath the climber is not adequate as evidenced by the resilient material is not deep enough. The area around and underneath the large climber has exposed landscape paper which can create a trip hazard. Regulation: 8.16.2.24J(3) <u>Corrective Action Plan</u> An approved resilient surface will be provided beneath the climbing structures, swings, and slides. Date to be Completed: 03/17/2017	Non-compliance	
8.16.2.24 K SWIMMING, WADING AND WATER	N/A	
8.16.2.24 L FIELD TRIPS	Compliance	
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 <u>Deficiencies</u> The center's first aid kit does not contain Band aids; Nonporous gloves. Several of the individual first aid kits in each classroom. Regulation: 8.16.2.26B(2) <u>Corrective Action Plan</u> Missing items will be added to the first-aid kit; staff will be reminded to replace any item used. CORRECTED ON SITE. Date to be Completed: 03/17/2017	Non-compliance	
8.16.2.26 C MEDICATION	Compliance	
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS	Compliance	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS	Compliance	
Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING	Non-compliance	

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Buildings, Grounds & Safety

Deficiencies

The Equipment are not in good repair as evidenced by gray carpet in Pre-K room C is fraying and lifting at the edge, several napping mats in several of the classrooms are torn.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established. CORRECTED ON SITE.

Date to be Completed: 02/17/2017

Deficiencies

The shapes rug in pre-k C room and the vent in the Mobile infants G room has a heavy accumulation of dust in vent and rug needs to be cleaned.

Regulation: 8.16.2.29A(1)

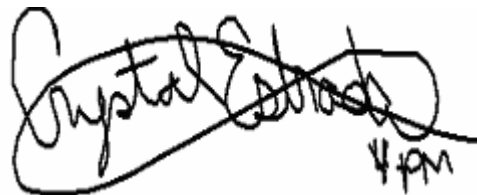
Corrective Action Plan

A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards.

Date to be Completed: 03/17/2017

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 <u>Deficiencies</u> The center does not have emergency lighting that turns on automatically when electrical service is disrupted. Emergency light in classroom D is not operable. Regulation: 8.16.2.29E(2) <u>Corrective Action Plan</u> Emergency lighting will be installed. Date to be Completed: 03/17/2017	Non-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, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.29 J PETS	Compliance

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.



02/17/2017



02/17/2017

Surveyor: Crystal Estrada

Date

Facility Rep: Elvira Martinez

Date