

Center Name:			Address:				Phone:		
Early Learning Preschool			2704 Southern Blvd. Suite 10 Rio Rancho, NM 87124			(505)892-5	(505)892-5105		
License Number:	Issue Date:	Expiration I	Date:	Type:			Status:	•	
94648	12/4/2016	12/3/2017		4 Star Chile	d Care Center		Licensed		
Capacity				•		Cei	nsus		
Over Age 2: 40	Under Age 2:	0 Night	Care:	0 P	layground: 25	Ove	er 2: 3	4 Und	der 2: 0
Days and Hours of	Operation								
	<u>Monday</u>	Tuesda	<u>y</u> <u>W</u>	<u>/ednesday</u>	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times	08:30 AM	08:30 AM	M (08:30 AM	08:30 AM	08:3	0 AM	Closed	Closed
Closing Times	: 05:30 PM	05:30 PI	M (05:30 PM	05:30 PM	05:3	0 PM		
# of Classrooms:	Р	urpose:			Date:		Т	ime:	
2	S	emi-Annual			05/01/2017		1	0:45 AM	
Comments									

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	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	Compliance		
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 Deficiencies 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. Regulation: 8.16.2.21B(3)(c) Corrective Action Plan 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: 06/01/2017	Non-compliance		
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected		
Administrative Requirements			
8.16.2.22 A ADMINISTRATION RECORDS	Non-compliance		

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Administrative Requirements

Deficiencies

The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent licensing survey.

Regulation: 8.16.2.22A

Corrective Action Plan

The center will post the missing item.

Date to be Completed: 06/01/2017	
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.22 C POLICY AND PROCEDURES	Non-compliance
<u>Deficiencies</u>	
The program does not have an up to date emergency evacuation and disaster preparedness	
plan approved by the department. Program need to accommodations for children with	
chronic medical conditions and accommodations for children with special needs.	
Regulation: 8.16.2.22C(8)	
Corrective Action Plan	
An emergency evacuation and disaster preparedness plan will be developed.	
Date to be Completed: 06/01/2017	
8.16.2.22 D FAMILY HANDBOOK	Not Inspected
8.16.2.22 E CHILDREN'S RECORDS	Non-compliance
<u>Deficiencies</u>	
Of the 6 children's records reviewed, 2 is/are missing the name and telephone number of two	
people in the local area to contact in an emergency when a parent or guardian cannot be	
reached. See Children's Records 8.16.2.22 form for the child(ren) with missing information.	
Regulation: 8.16.2.22E(2)(b)	
Corrective Action Plan	
Parents will be advised to review and add missing information. The center will review all	
children's records to ensure up-to-date emergency contact information is on file.	
Date to be Completed: 06/01/2017	
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
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING	Compliance
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Non-compliance

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Personnel & Staffing

Deficiencies

The center failed to post the capacity for each activity/interest area. 2 out of 1 classrooms 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 according to the activity and size of the space, and will not exceed the group size requirement as specified in Paragraph (1) of Subsection C of 8.16.2.23 NMAC

Date to be Completed: 06/01/2017

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	Compliance
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Compliance
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE	N/A
8.16.2.24 G PHYSICAL ENVIRONMENT	Not Inspected
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Not Inspected
8.16.2.24 I EQUIPMENT AND PROGRAM	Not Inspected
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	N/A
8.16.2.25 D KITCHENS	Non-compliance
<u>Deficiencies</u>	
A food is not properly stored; the item is not in an airtight container; labeled and	
dated.Apples in the refrigerator were not dated and sealed.	
Regulation: 8.16.2.25D(4)	
Corrective Action Plan	
The person responsible for food service will be instructed in proper food storage.	
Date to be Completed: 06/01/2017	
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	Not Inspected
8.16.2.26 C MEDICATION	Not Inspected

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Center Name:	License Number:	Date:	
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Health & S	Safety Requirements		
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS			Compliance
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS			N/A
Buildings	s, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING			Compliance
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			Non-compliance
Deficiencies The center does not have emergency lighting that turns on au service is disrupted. (The West side room emergency lights w Regulation: 8.16.2.29E(2) Corrective Action Plan Emergency lighting will be installed. Date to be Completed: 06/01/2017			
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 Deficiencies The center's fire extinguishers is not inspected yearly. (Tag da Regulation: 8.16.2.29H(3)(k) Corrective Action Plan Equipment will be maintained and inspected yearly.	ated 3/2016)		Non-compliance
Date to be Completed: 06/01/2017			
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEG	AL DRUGS AND CONTROLLED SUBS	TANCES	Compliance
8.16.2.29 J PETS			

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.

05/01/2017

05/01/2017

Surveyor:Kia Kennedy

Date

Facility Rep:Wanda Jackson

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Date