Facility

Name: East Gate Kids License Number: 21809

Address: 12120 Copper NE, Albuquerque, NM 87123

Phone: 5052945102 Fax: N/A E-mail: eastgatetuition@gmail.com

License Information

Type: 5 Star FOCUS Child Status: Licensed Issue Date: 03/05/2018 Expiration Date:

Care Center 03/04/2019

05/04/2015

Capacity

Over Age 2: 232 Under Age 2: 41 Night Care: 0 Playground: 156

Square Footage: 0

Census

Over 2: 74 Under 2: 38

Classrooms

Number of Classrooms: 10

Days and Hours of Operation

Monday Tuesday Wednesday Thursday Friday

6:30 AM - 6:30 PM 6:30 AM - 6:30 PM 6:30 AM - 6:30 PM 6:30 AM - 6:30 PM

Saturday Sunday Closed Closed

Inspection

Date: 01/04/2019 Time In: 9:10 AM Time Out: 2:30 PM Purpose: Annual

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	Not Inspected
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	Compliance

Licensure (continued)

8.16.2.21 C Incident Reporting Requirements

Not Inspected

Administrative Requirements

8.16.2.22 A Administrative Records	Compliance
8.16.2.22 B Mission, Philosophy and Curriculum Statement	Compliance
8.16.2.22 C Policy and Procedures	Compliance
8.16.2.22 D Family Handbook	Compliance

8.16.2.22 E Children's Records

Non-compliance

Of the 25 children's records reviewed, 3 is/are missing a list of people authorized to pick up the child and an authorization form signed by the parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure complete information and authorization is on file.

Regulation: 8.16.2.22.E.1.c.

Date to be Completed: *02/03/2019*

Of the 25 children's records reviewed, 1 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.22 form for the child(ren) with no immunization/exemption.

Corrective Action Plan

Parents will be advised to submit a complete and up-to-date immunization record or exemption. The center will review all children's records to ensure complete information is on file.

Regulation: 8.16.2.22.E.1.e.

Date to be Completed: 02/03/2019

Of the 25 children's records reviewed, 11 is/are missing information on allergies or medical conditions. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all records to ensure information regarding allergies and medical conditions is on file.

Regulation: 8.16.2.22.E.2.a.

Date to be Completed: 02/03/2019

8.16.2.22 E Children's Records (continued)

Non-compliance

Of the 25 children's records reviewed, 4 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.

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.

Regulation: 8.16.2.22.E.2.b.

Date to be Completed: 02/03/2019

8.16.2.22 F Personnel Records

Non-compliance

From the review of staff records, it was determined that 1 out of 36 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.

Regulation: 8.16.2.22.F.1.e.

Date to be Completed: 01/04/2019

The center failed to have 3 out of 20 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. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

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

Regulation: 8.16.2.22.F.1.f.

Date to be Completed: 02/03/2019

From the review of staff records, it was determined that 5 out of 20 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.

Regulation: 8.16.2.22.F.1.g.

Date to be Completed: 02/03/2019

8.16.2.22 F Personnel Records (continued)

Non-compliance

From the review of staff records, it was determined that 4 out of 20 staff records does/do not include an emergency contact number. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will have staff complete required information.

Regulation: 8.16.2.22.F.1.i.

Date to be Completed: 02/03/2019

From the review of staff records, it was determined that 14 out of 20 staff records does/do not include a professional development plan based on seven areas of competency. See Staff Records 8.16.2.22 form for staff who need a current plan.

Corrective Action Plan

The center will have staff complete a professional development plan and sign the plan . The plan will be maintained on file.

Regulation: 8.16.2.22.F.1.n.

Date to be Completed: 02/03/2019

From the review of staff records, it was determined that 1 out of 20 staff records does/do not include signed acknowledgement that the personnel handbook had been read and understood. See Staff Records 8.16.2.22 form for staff who need to complete the acknowledgement.

Corrective Action Plan

The center will have staff complete the required acknowledgement and will retain on file.

Regulation: 8.16.2.22.F.1.o.

Date to be Completed: 02/03/2019

From the review of staff records, it was determined that 1 out of 20 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.

Corrective Action Plan

The center will have staff complete the required acknowledgement and will retain on file.

Regulation: *8.16.2.22.F.1.p.*

Date to be Completed: 02/03/2019

8.16.2.22 G Personnel Handbook

Compliance

Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements

Compliance

Personnel & Staffing (continued)

8.16.2.23 B Staff Qualifications and Training

Non-compliance

From the review of staff records, it was determined that 1 out of 20 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 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: 8.16.2.23.B.2.a.

Date to be Completed: 02/03/2019

From the review of staff records, it was determined that 8 out of 20 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.

Regulation: 8.16.2.23.B.2.c.

Date to be Completed: 02/03/2019

Educators did not complete the following training within 3-months: Health and Safety Training for 12 out of 20 staff

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:

Regulation: 8.16.2.23.B.2.b.

Date to be Completed: 02/03/2019

8.16.2.23 C Staff/Child Ratios and Group Sizes

Compliance

Services & Care of Children

8.16.2.24 A Guidance Non-compliance

Of the 20 staffs records reviewed, 1 is/are missing a signed staff acknowledgement that the center's guidance policy had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

Corrective Action Plan

The center will review all staffs records to ensure a signed staff acknowledgement is on file.

Regulation: 8.16.2.24.A.1.

Date to be Completed: 02/03/2019

8.16.2.24 B Naps or Rest Period

Compliance

Services & Care of Children (continued)	
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	Compliance
8.16.2.24 K Swimming, Wading 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

Buildings, Grounds & Safety

8.16.2.28 A-H Transportation Requirements for Centers

8.16.2.29 A Housekeeping

Non-compliance

Not Inspected

The school age kitchen has a heavy accumulation of storage items, and a collection of unused art materials/projects.

Corrective Action Plan

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

(continued)

Regulation: 8.16.2.29.A.1. Date to be Completed: 02/03/2019

The Premises are not in good repair as evidenced by walls in the Teal and School Age classroom have holes and peeling paint.

Corrective Action Plan

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

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/03/2019

The premises in the school age boys bathroom are not safe in that exposed wires above light fixture.

Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed.

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/03/2019

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

8.16.2.29 G Toilet and Bathing Facilities

Non-compliance

The bathroom for the Teal classroom is not accessible. Bathroom is used for storage.

Corrective Action Plan

The center will make necessary changes to the bathroom to ensure it is accessible and functional.

Regulation: 8.16.2.29.G.3.

Date to be Completed: 02/03/2019

8.16.2.29 H Safety Compliance	Compliance
8.16.2.29 H3(f)(i)(k) Safety Compliance	Compliance
8.16.2.29 J Pets	N/A

Additional Comments

None

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: Michelle Crespin

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