

<b>Center Name:</b> Gold Star Academy		<b>Address:</b> 5600 Central SW Albuquerque, NM 87105			<b>Phone:</b> (505)352-2212		
<b>License Number:</b> 143093	<b>Issue Date:</b> 02/24/2016	<b>Expiration Date:</b> 02/23/2017	<b>Type:</b> 2 Star Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	38	Under Age 2:	10	Night Care:	0	Playground:	31
		Over 2:	13	Under 2:	2		
<b>Days and Hours of Operation</b>							
	<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		
<b># of Classrooms:</b> 4	<b>Purpose:</b> Follow-up		<b>Date:</b> 02/08/2017		<b>Time:</b> 10:30 AM		
<b>Comments</b> On site follow-up conducted. The following deficiencies remain.							

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	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 <u>Deficiencies</u> The center failed to post classroom capacities, and ratios and <b>group sizes</b> in an area of the room that is easily visible to parents, staff and visitors. <b>Regulation:</b> 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. <b>Date to be Completed:</b> 02/22/2017	Non-compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
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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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b>  The center did not have available for review written policies and procedures covering expulsion of children.  <b>Regulation:</b> 8.16.2.22C(1)-(8)</p> <p><b><u>Corrective Action Plan</u></b>  The center will complete written policies and procedures for the missing area(s).  <b>Date to be Completed:</b> 02/22/2017</p> <p><b><u>Deficiencies</u></b>  The program does not have an up to date emergency evacuation and disaster preparedness plan approved by the department.  <b>Regulation:</b> 8.16.2.22C(8)</p> <p><b><u>Corrective Action Plan</u></b>  An emergency evacuation and disaster preparedness plan will be developed.  <b>Date to be Completed:</b> 02/22/2017</p>		
<b>8.16.2.22 D FAMILY HANDBOOK</b>	Not Inspected	
<p><b>8.16.2.22 E CHILDREN'S RECORDS</b></p> <p><b><u>Deficiencies</u></b>  Of the 5 children's records reviewed, 2 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.  <b>Regulation:</b> 8.16.2.22E(1)(e)</p> <p><b><u>Corrective Action Plan</u></b>  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.  <b>Date to be Completed:</b> 02/22/2017</p>	Non-compliance	
<p><b>8.16.2.22 F PERSONNEL RECORDS</b></p> <p><b><u>Deficiencies</u></b>  From the review of staff records, it was determined that 2 out of 5 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.  <b>Regulation:</b> 8.16.2.22F(1)(g)</p> <p><b><u>Corrective Action Plan</u></b>  The center will obtain documentation of first-aid and CPR training and retain on file.  <b>Date to be Completed:</b> 02/22/2017</p> <p><b><u>Deficiencies</u></b>  From the review of staff records, it was determined that 1 out of 5 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information.  <b>Regulation:</b> 8.16.2.22F(1)(e)</p> <p><b><u>Corrective Action Plan</u></b>  The center will obtain documentation of a background check.  <b>Date to be Completed:</b> 02/22/2017</p>	Non-compliance	

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### Administrative Requirements

**Deficiencies**

From the review of staff records, it was determined that 2 out of 5 staff records does/do not include the required Form I-9. See Staff Records 8.16.2.22 form for staff missing the form.

**Regulation:** 8.16.2.22F(1)(q)

**Corrective Action Plan**

The center will obtain Form I-9s from all staff and maintain them in their personnel files.

**Date to be Completed:** 02/22/2017

**Deficiencies**

From the review of staff records, it was determined that 2 out of 5 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.

**Regulation:** 8.16.2.22F(1)(n)

**Corrective Action Plan**

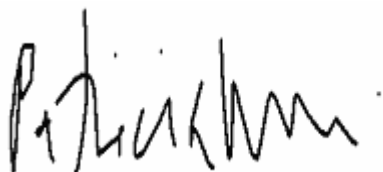
The center will have staff complete a professional development plan and sign the plan . The plan will be maintained on file.

**Date to be Completed:** 02/22/2017

<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Not Inspected
<b>Personnel &amp; Staffing</b>	
<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>	Not Inspected
<b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b>	Not Inspected
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>	Not Inspected
<b>Services &amp; Care of Children</b>	
<b>8.16.2.24 A GUIDANCE</b>	Not Inspected
<b>8.16.2.24 B NAPS OR REST PERIOD</b>	Not Inspected
<b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b>	Not Inspected
<b>8.16.2.24 D DIAPERING AND TOILETING</b>	Not Inspected
<b>8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS</b>	Not Inspected
<b>8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE</b>	N/A
<b>8.16.2.24 G PHYSICAL ENVIRONMENT</b>	Not Inspected
<b>8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT</b>	Not Inspected
<b>8.16.2.24 I EQUIPMENT AND PROGRAM</b>	Not Inspected
<b>8.16.2.24 J OUTDOOR PLAY AREAS</b>	Compliance
<b>8.16.2.24 K SWIMMING, WADING AND WATER</b>	Not Inspected
<b>8.16.2.24 L FIELD TRIPS</b>	Not Inspected
<b>Food Service</b>	
<b>8.16.2.25 B MEALS AND SNACKS</b>	Not Inspected
<b>8.16.2.25 C MENUS</b>	Not Inspected
<b>8.16.2.25 D KITCHENS</b>	Compliance

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<b>Food Service</b>		
8.16.2.25 E MEAL TIMES		Not Inspected
<b>Health &amp; Safety Requirements</b>		
8.16.2.26 A HYGIENE		Not Inspected
8.16.2.26 B FIRST AID REQUIREMENTS		Compliance
8.16.2.26 C MEDICATION		Not Inspected
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		Not Inspected
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS		Not Inspected
<b>Buildings, Grounds &amp; Safety</b>		
8.16.2.29 A HOUSEKEEPING		Compliance
8.16.2.29 B PEST CONTROL		Not Inspected
8.16.2.29 C MECHANICAL SYSTEMS		Not Inspected
8.16.2.29 D WATER AND WASTE		Not Inspected
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. Regulation: 8.16.2.29E(2) <u>Corrective Action Plan</u> Emergency lighting will be installed. Date to be Completed: 02/22/2017		Non-compliance
8.16.2.29 F EXITS AND WINDOWS		Not Inspected
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		Not Inspected
8.16.2.29 J 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.



02/08/2017



02/08/2017

Surveyor: Patricia Williams

Date

Facility Rep: Gabriella Villalobos

Date