



Center Name: Heights Christian Day Care			Address: 6935 Comanche NE Albuquerque, NM 87110			Phone: (505)881-9529		
License Number: 30057	Issue Date: 10/28/2016	Expiration Date: 10/27/2017	Type: 2 Star Child Care Center			Status: Licensed		
Capacity Over Age 2: 124 Under Age 2: 15 Night Care: 0 Playground: 159						Census Over 2: 46 Under 2: 10		
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:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed	
Closing Times:	06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM			
# of Classrooms: 6		Purpose: Annual		Date: 08/14/2017		Time: 10:00 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	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
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected

Administrative Requirements


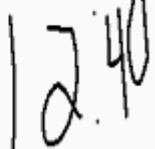
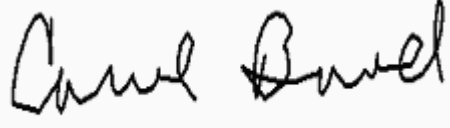
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.22 C POLICY AND PROCEDURES <u>Deficiencies</u> The center did not have available for review written policies and procedures covering expulsion of children. Regulation: 8.16.2.22C(1)-(8) <u>Corrective Action Plan</u> The center will complete written policies and procedures for the missing area(s). Date to be Completed: 09/14/2017	Non-compliance

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Administrative Requirements		
<p><u>Deficiencies</u> The program does not have an up to date emergency evacuation and disaster preparedness plan approved by the department. Regulation: 8.16.2.22C(8)</p> <p><u>Corrective Action Plan</u> An emergency evacuation and disaster preparedness plan will be developed. Date to be Completed: 09/14/2017</p>		
8.16.2.22 D FAMILY HANDBOOK	Compliance	
8.16.2.22 E CHILDREN'S RECORDS	Compliance	
<p>8.16.2.22 F PERSONNEL RECORDS</p> <p><u>Deficiencies</u> The center failed to have 4 out of 5 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. Regulation: 8.16.2.22F(1)(f)</p> <p><u>Corrective Action Plan</u> The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction. Date to be Completed: 09/14/2017</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 1 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)</p> <p><u>Corrective Action Plan</u> 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: 09/14/2017</p>	Non-compliance	
8.16.2.22 G PERSONNEL HANDBOOK	Compliance	
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	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	
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	

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Services & Care of Children		
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	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	Not Inspected	
8.16.2.25 D KITCHENS <u>Deficiencies</u> The refrigerator in the kitchen does not have a working internal thermometer. In the two's classroom. Regulation: 8.16.2.25D(6) <u>Corrective Action Plan</u> The center will obtain and place a working thermometer in refrigerator. Date to be Completed: 09/14/2017	Non-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	Compliance	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS <u>Deficiencies</u> A vehicle used for transporting children is not equipped with an operable fire extinguisher . Van # 2. Regulation: 8.16.2.28A <u>Corrective Action Plan</u> The vehicle will be equipped with required items. Date to be Completed: 09/14/2017	Non-compliance	
Buildings, 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	Compliance	

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Buildings, Grounds & Safety		
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 <u>Deficiencies</u> The center failed to conduct an emergency preparedness practice drills for at least once a quarter. Regulation: 8.16.2.29H(1) <u>Corrective Action Plan</u> A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year. Date to be Completed: 09/14/2017	Non-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.

 	08/14/2017		08/14/2017
Surveyor: Patricia Williams	Date	Facility Rep: Carol Baird	Date