

Center Name: Jaslynn's Daycare		Address: 1000 Gidding St Clovis, NM 88101			Phone: (575)763-7786		
License Number: 166487	Issue Date: 06/9/2017	Expiration Date: 03/11/2018	Type: 2 Star Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	29	Under Age 2:	0	Night Care:	0	Playground:	29
		Over 2:	4	Under 2:	0		
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:	06:30	06:30	06:30	06:30	06:30	Closed	Closed
Closing Times:	05:30 P	05:30 P	05:30 P	05:30 P	05:30 P		
# of Classrooms: 2	Purpose: Annual		Date: 01/17/2018		Time: 09:35 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	Compliance
8.16.2.11 B RENEWAL OF LICENSE	Compliance
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	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	Compliance
8.16.2.22 D FAMILY HANDBOOK	Compliance
8.16.2.22 E CHILDREN'S RECORDS	Non-compliance

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Administrative Requirements

Deficiencies

Of the 5 children's records reviewed, 1 is/are missing the name and telephone number of a physician or emergency medical center authorized by a parent or guardian to contact in case of illness or emergency. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Regulation: 8.16.2.22E(2)(c)

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure contact information for a physician or medical center is on file.

Date to be Completed: 02/19/2018

8.16.2.22 F PERSONNEL RECORDS

Non-compliance

Deficiencies

From the review of staff records, it was determined that 4 out of 4 staff records does/do not include the staff's position. See Staff Records 8.16.2.22 form for staff with this missing information.

Regulation: 8.16.2.22F(1)(b)

Corrective Action Plan

The center will add the position to the record.

Date to be Completed: 02/19/2018

Deficiencies

From the review of staff records, it was determined that 4 out of 4 staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.22 form for staff with this missing information.

Regulation: 8.16.2.22F(1)(c)

Corrective Action Plan

The center will add staff's current and past duties and responsibilities to the record.

Date to be Completed: 02/19/2018

Deficiencies

From the review of staff records, it was determined that 4 out of 4 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.22 form for staff with missing documentation.

Regulation: 8.16.2.22F(1)(h)

Corrective Action Plan

The center will obtain verification of all training and retain on file.

Date to be Completed: 02/19/2018

Deficiencies

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

Regulation: 8.16.2.22F(1)(i)

Corrective Action Plan

The center will have staff complete required information.

Date to be Completed: 02/19/2018

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Administrative Requirements

Deficiencies

From the review of staff records, it was determined that 4 out of 4 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.

Regulation: 8.16.2.22F(1)(o)

Corrective Action Plan

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

Date to be Completed: 02/19/2018

Deficiencies

From the review of staff records, it was determined that 4 out of 4 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: 02/19/2018

8.16.2.22 G PERSONNEL HANDBOOK	Compliance
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Personnel & Staffing

8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
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<p>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</p> <p><u>Deficiencies</u></p> <p>The center failed to keep a training log on file with Employee's name; Date of hire; Position; Date of training; Clock hours; Competency area; Source of training; Training certificate for 4 out of 4 staff. See Staff Records 8.16.2.22 form for staff who are missing a complete training log.</p> <p>Regulation: 8.16.2.23B(2)(l)</p> <p><u>Corrective Action Plan</u></p> <p>A training log will be completed for each staff that includes the employee 's name, date of hire, and position, date of training, clock hours, competency area, source of training, and training certificate.</p> <p>Date to be Completed: 02/19/2018</p>	Non-compliance
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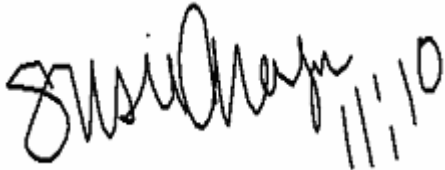
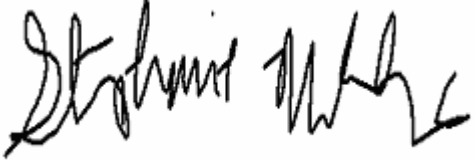
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Compliance
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Services & Care of Children

8.16.2.24 A GUIDANCE	Compliance
8.16.2.24 B NAPS OR REST PERIOD	Not Inspected
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	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		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		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		Not Inspected
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		Not Inspected
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS		N/A
Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING		Compliance
8.16.2.29 B PEST CONTROL		Not Inspected
8.16.2.29 C MECHANICAL SYSTEMS Deficiencies Water coming from a faucet is above 110 degrees Fahrenheit. Regulation: 8.16.2.29C(5) Corrective Action Plan The center will install a tempering valve ahead of the water-heater piping to ensure water temperature remains below 110 degrees Fahrenheit. Date to be Completed: 02/19/2018		Non-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		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

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<p>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.</p>			
			
01/17/2018		01/17/2018	
Surveyor: Susie Aragon	Date	Facility Rep: Stephanie McEldowney	Date