



Facility

Name: Joanne Jaramillo **License Number:** 69424
Address: 1456 Gutierrez Rd., Bernalillo, NM 87004
Phone: 5058671577 **Fax:** **E-mail:** joannejaramillo93@gmail.com

License Information

Type: 2 Star Group Child Care Home **Status:** Licensed **Issue Date:** 06/13/2018 **Expiration Date:** 06/12/2019

Capacity

Over Age 2: 8 **Under Age 2:** 4 **Night Care:** 0 **Playground:** 0
Square Footage: 0

Census

Over 2: 10 **Under 2:** 0

Classrooms

Number of Classrooms: 1

Days and Hours of Operation

Monday 6:00 AM - 2:00 AM	Tuesday 6:00 AM - 2:00 AM	Wednesday 6:00 AM - 2:00 AM	Thursday 6:00 AM - 2:00 AM	Friday 6:00 AM - 2:00 AM
Saturday Closed	Sunday Closed			

Inspection

Date: 11/01/2018 **Time In:** 9:54 AM **Time Out:** 10:45 AM **Purpose:** Semi-Annual

Licensure

8.16.2.31 A Licensing Requirements	Not Inspected
8.16.2.31 B Capacity of a Home	Compliance
8.16.2.31 C Incident Reporting Requirements	Not Inspected

Administrative Requirements

8.16.2.32 A Administrative Records	Compliance
8.16.2.32 B Mission, Philosophy and Curriculum Statement	Not Inspected
8.16.2.32 C Parent Handbook	Not Inspected

Administrative Requirements *(continued)*

8.16.2.32 D Children's Records

Non-compliance

Of the 4 children's records reviewed, 4 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.32 form for the child(ren) with no immunization/exemption.

Corrective Action Plan

The home will review a child's record to ensure complete information has been obtained before a child is admitted.

Regulation: 8.16.2.32.D.1.e.

Date to be Completed: 12/01/2018

Of the 4 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 8.16.2.32 form for the child(ren) with missing information.

Corrective Action Plan

The home will review a child's record to ensure complete information has been obtained before a child is admitted.

Regulation: 8.16.2.32.D.2.b.

Date to be Completed: 12/01/2018

8.16.2.32 E Personnel Records

Non-compliance

The home does not have a written plan for ongoing professional development for each staff member, including the director, that is based on the seven areas of competency, consistent with the career lattice, and based on the individual's goals.

Corrective Action Plan

A written plan for employee development will be developed.

Regulation: 8.16.2.32.E.4.

Date to be Completed: 12/01/2018

8.16.2.32 F Personnel Handbook

Not Inspected

Personnel & Staffing

8.16.2.33 A Personnel and Staffing Requirements

Compliance

Personnel & Staffing *(continued)*

8.16.2.33 B Staff Qualifications and Training

Non-compliance

From the review of staff records, it was determined that 2 out of 2 staff working more than 20 hours a week, has/have no documentation of at least 12 hours of annual training in the approved subject areas See Staff Records 8.16.2.32 for staff missing documentation of training.

Corrective Action Plan

Annual training will be completed as required and documentation retained on file.

Regulation: 8.16.2.33.B.3.

Date to be Completed: 12/01/2018

Services & Care of Children

8.16.2.34 A Guidance	Compliance
8.16.2.34 B Naps or Rest Period	Compliance
8.16.2.34 C Additional Requirements for Infants and Toddlers	Compliance
8.16.2.34 D Diapering and Toileting	Compliance
8.16.2.34 E Additional Requirements for Children with Special Needs	Compliance
8.16.2.34 F Night Care	Not Inspected
8.16.2.34 G Physical Environment	Not Inspected
8.16.2.34 H Social-Emotional Responsive Environment	Compliance
8.16.2.34 I Equipment and Program	Not Inspected
8.16.2.34 J Outdoor Play	Compliance
8.16.2.34 K Swimming, Wadding and Water	Not Inspected
8.16.2.34 L Field Trips	Not Inspected

Food Service

8.16.2.35 B Meals and Snacks	Compliance
8.16.2.35 C Menus	Compliance
8.16.2.35 D Kitchens	Compliance
8.16.2.35 E Meal Times	Compliance

Health & Safety Requirements

8.16.2.36 A Hygiene	Compliance
8.16.2.36 B First Aid Requirements	Not Inspected

Health & Safety Requirements (*continued*)

8.16.2.36 C Medication *Not Inspected*

8.16.2.36 D Illness and Notifiable Diseases *Compliance*

8.16.2.37 A-G Transportation Requirements for Homes *Not Inspected*

Buildings, Grounds & Safety

8.16.2.38 A Housekeeping *Compliance*

8.16.2.38 B Pest Control *Compliance*

8.16.2.38 C Mechanical Systems *Compliance*

8.16.2.38 D Lighting, Lighting Fixtures and Electrical *Compliance*

8.16.2.38 E Exits *Compliance*

8.16.2.38 F Toilet and Bathing Facilities: *Compliance*

8.16.2.38 G Safety Compliance ***Non-compliance***

The home failed to conduct a fire drill for the month(s) of October 2018.

Corrective Action Plan

A monthly fire drill will be held and recorded.

Regulation: 8.16.2.38.G.3.

Date to be Completed: 12/01/2018

The home's fire extinguisher does not have a tag with a date verifying yearly inspection. Extinguisher tagged June 2017.

Corrective Action Plan

The fire extinguisher will be inspected and have an official tag noting the date of inspection.

Regulation: 8.16.2.38.G.2.

Date to be Completed: 12/01/2018

8.16.2.38 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances *Compliance*

8.16.2.38 I Pets *Compliance*

Additional Comments

Provider's clearance letter expires Nov. 13, 2018.

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: *Kia Kennedy*



Facility Representative: *Joanne Jaramillo*