

Provider Name:			Address:				Phone:		
Julia Zubia	Albuquerque, NM 87120				(505)750-7773				
Registration Num	Issue Date:	Expiration I	Date:	Type:			Status:	•	
121416	11/1/2016	10/31/2017		Child Care I	Care Reg. No SSN-Food Only Registered				
Capacity				-		Cei	nsus		
Over Age 2: 4	Under Age 2:	2 Night	Care:	0 Pla	Playground: 0 Over 2: 1			Under 2: 2	
Days and Hours of Operation									
	<u>Monday</u>	<u>Tuesda</u>	<u>y</u> <u>W</u>	<u>'ednesday</u>	<u>Thursday</u>	Fri	<u>day</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times	: 06:30 AM	06:30 AI	M (06:30 AM	06:30 AM	06:3	0 AM	Closed	Closed
Closing Times: 08:00 PM		08:00 PI	PM 08:00 PM		08:00 PM	08:00 PM			
# of Classrooms:	Pu	rpose:			Date:		Ti	ime:	_
1	An	nual			08/23/2017		10):15 AM	
	•		•	•			•	•	•

Comments

BGC-09/17/2015

PROVIDERS 2 HHM WERE CLEARED 11/1/16

LAST CACFP-06/27/2017

FIRST AID/CPR EXPIRES-10/2018

PROVIDER IS FOOD ONLY

CURRENT ENROLLMENT YEAR TRAINING COMPLETED

PROVIDER STATES THAT FIREPLACE IS NOT IN USE DURING HOURS OF CARE

PROVIDER CARES FOR 3 NON-RESIDENT CHILDREN

PROVIDER HAD GRANDCHILD PRESENT AND STATED WAS AT HER HOME FOR 3 DAYS ONLY

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:			
Registration			
8.17.2.11 A,B BACKGROUND CHECKS	Compliance		
8.17.2.11 C OTHER PERSONS BACKGROUND CHECKS	Compliance		
8.17.2.11 E DOCUMENTATION	Compliance		
8.17.2.13 VISITS BY AGENCY AND REGISTERED AUTHORITY	Compliance		
8.17.2.14 A-C NON-TRANSFERABILITY OF REGISTRATION	Compliance		
8.17.2.15 A-C INCIDENT REPORTS	Compliance		
Record Keeping Requirements			
8.17.2.24 RECORD KEEPING REQUIREMENTS	Compliance		
Caregiver Requirements			
8.17.2.10 A CAREGIVER REIMBURSEMENTS	Compliance		
8.17.2.10 B AGE REQUIREMENT	Compliance		
8.17.2.10 E F CAREGIVER REPORTING	Compliance		
8.17.2.10 G PRIMARY AND SUBSTITUTE CAREGIVER TRAINING	N/A		
8.17.2.10 H PRIMARY AND SUBSTITUTE CAREGIVER TRAINING	Compliance		
8.17.2.10 I PRIMARY CAREGIVER FOR INFANTS	Compliance		
8.17.2.10 K CPR AND FIRST AID CERTIFICATION	Compliance		

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Provider Name:	Registration Number:	Date:		
Julia Zubia	121416	08/23/2017		
Caregiver Requirements				
8.17.2.10 L COMPETENCY TRAINING			Compliance	
Group Compo	sition			
8.17.2.21 A NON-RESIDENT CHILDREN			Compliance	
8.17.2.21 B CHILDREN UNDER 2			Compliance	
8.17.2.21 C CHILDREN UNDER 6			Compliance	
8.17.2.21 D DROP IN CHILDREN			Compliance	
8.17.2.21 E SHIFT CHANGES			Compliance	
8.17.2.21 F CAREGIVER INVOLVEMENT Deficiencies Caregivers are not physically present in the care of nonresident children designated hours of child care. PROVIDER WAS NOT HOME WHEN I A SCHEDULED VISIT. CHILDREN WERE LEFT WITH PROVIDERS MOT WAS INFORMED THAT SHE IS PRIMARY CAREGIVER AND CHILDRE SUPERVISED BY HER AT ALL TIMES. PROVIDER DOES NOT HAVE SUBSTITUTE CAREGIVER. Regulation: 8.17.2.21F Corrective Action Plan All caregiver's will be physically present and actively involved in the care the designated hours of child care. Date to be Completed: 08/23/2017	RRIVED FOR HER. PROVIDER N MUST BE AN APPROVED		Non-compliance	
Health & Safety Re	quirements			
8.17.2.22 A SAFE CONDITION			Compliance	
8.17.2.22 B, C ELECTRICAL OUTLETS			Compliance	
8.17.2.22 D TEMPERATURE			Compliance	
8.17.2.22 E VENTILATION			Compliance	
8.17.2.22 F HEATERS AND HEATING UNITS 8.17.2.22 G HOT AND COLD RUNNING WATER			Compliance	
			Compliance	
8.17.2.22 H, I, J INSIDE AND OUTSIDE PLAY AREAS 8.17.2.22 K STORAGE OF DANGEROUS MATERIALS			Compliance	
8.17.2.22 L WORKING TELEPHONE			Compliance	
8.17.2.22 M EMERGENCY NUMBERS			Compliance	
8.17.2.22 N SMOKE / CARBON MONOXIDE DETECTOR			Non-compliance	
Deficiencies Home does not have a working smoke detector installed. PROVIDER MUST SMOKE DETECTOR Regulation: 8.17.2.22N Corrective Action Plan Caregiver will install at least one working smoke detector and a carbon monoxid appropriate area in the home. Date to be Completed: 09/23/2017				
8.17.2.22 O,P FIREARM SAFETY/STORAGE			N/A	

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Provider Name: Julia Zubia		Registration Number:	Date: 08/23/2017	
Julia Zubia			08/23/2017	
	Health & Safety Red	quirements		
8.17.2.22 Q. SMOKING, ALCOHOL, AND ILLEGAL DR	UG USE			N/A
8.17.2.22 R FIRE EXTINGUISHER Deficiencies Fire extinguisher is not Certified once a year, with off PROVIDER PURCHASED NEW FIRE EXTINGUITAGGED. Regulation: 8.17.2.22R				Non-compliance
Corrective Action Plan Fire extinguisher will be easily accessible. Must be conoting the date of inspection. Date to be Completed: 09/23/2017	ertified once a year and will	have official tags		
8.17.2.22 S COMBUSTIBLE AND FLAMMABLE MATER	RIALS			Compliance
8.17.2.22 T EMERGENCY EVACUATION AND DIASTE	R PREPAREDNESS PLAN			Compliance
8.17.2.22 U MAJOR EXITS				Compliance
8.17.2.22 V TOYS, OBJECTS AND CRIB STANDARDS				Compliance
8.17.2.22 W TOILET ROOMS				Compliance
8.17.2.22 X FIRST AID KIT				Complianc
8.17.2.22 Y PETS Deficiencies Caregiver did not inform parents or guardians in writing residence. PROVIDER MUST ADD CHILDREN THAVE ALL PARENTS SIGN FORM Regulation: 8.17.22Y Corrective Action Plan Caregiver will inform parents or guardians in writing the Date to be Completed: 09/23/2017	O PET ACKNOWLEDGI	MENT FORM AND		Non-compliand
8.17.2.22 Z DIAPER CHANGING				Complianc
8.17.2.22 AA TRANSPORTATION				N//
	Meal Requirer	nents		
8.17.2.23 H REFRIGERATION	•			Non-complianc
<u>Deficiencies</u> Food requiring refrigeration, including formula, not ke REFRIGERATOR TEMPERATURE READING A DEGREES FAHRENHEIT OR BELOW. Regulation: 8.17.2.23H	-			·
Corrective Action Plan Caregivers will keep food requiring refrigeration, inclubelow. Date to be Completed: 09/23/2017	iding formula, at 41 degree:	s Fahrenheit or		
8.17.2.23 I REFRIGERATOR THERMOMETERS				Compliance
	Caregiver's Respo	nsibilities		
8.17.2.25 A,B SUPERVISION				Compliance
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Provider Name:	Registration Number:	Date:		
Julia Zubia	121416	08/23/2017		
Caregiver's Responsibilities				
8.17.2.25 C GUIDANCE			Compliance	
8.17.2.25 D POLICIES AND PROCEDURES FOR EXPULSION			Compliance	
8.17.2.25 E ACTIVITIES AND EXPERIENCES			Compliance	
8.17.2.25 F CARING FOR INFANTS			Compliance	
8.17.25 G. REST PERIODS			Compliance	
8.17.25 H SWIMMING, WADING AND WATER			N/A	

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 provider.

08/23/2017

08/23/2017

Surveyor:Christine Juancho Date Provider Rep:Julia Zubia

Date