



### Facility

**Name:** *La Petite Academy Inc 7290* **License Number:** *81452*  
**Address:** *1501 Barbara Loop SE, Rio Rancho, NM 87124*  
**Phone:** *5058915755* **Fax:**  **E-mail:** *mgomez@lapetite.com*

### License Information

**Type:** *5 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *03/30/2018* **Expiration Date:** *03/29/2019*

### Capacity

**Over Age 2:** *127* **Under Age 2:** *54* **Night Care:** *0* **Playground:** *127*  
**Square Footage:** *0*

### Census

**Over 2:** *45* **Under 2:** *9*

### Classrooms

**Number of Classrooms:** *7*

### Days and Hours of Operation

<b>Monday</b> <i>6:00 AM - 6:30 PM</i>	<b>Tuesday</b> <i>6:00 AM - 6:30 PM</i>	<b>Wednesday</b> <i>6:00 AM - 6:30 PM</i>	<b>Thursday</b> <i>6:00 AM - 6:30 PM</i>	<b>Friday</b> <i>6:00 AM - 6:30 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

### Inspection

**Date:** *07/19/2018* **Time In:** *9:47 AM* **Time Out:** *12:15 PM* **Purpose:** *Semi-Annual*

### Licensure

8.16.2.11 A Types of Licenses	<i>Not Inspected</i>
8.16.2.11 B Renewal of License	<i>Not Inspected</i>
8.16.2.11 D Non-transferable Restrictions of License	<i>Not Inspected</i>
8.16.2.12 A, K, M Licensing Actions and Administrative Appeals	<i>Not Inspected</i>
8.16.2.17 E, F Surveys for Child Care Facilities	<i>Compliance</i>
8.16.2.18 D Complaints	<i>Not Inspected</i>
8.16.2.21 A Licensing Requirements	<i>Not Inspected</i>
8.16.2.21 B Capacity of Centers	<i>Compliance</i>

**Administrative Requirements (continued)**

8.16.2.21 C Incident Reporting Requirements

Not Inspected

**Administrative Requirements**

8.16.2.22 A Administrative Records

Compliance

8.16.2.22 B Mission, Philosophy and Curriculum Statement

Not Inspected

8.16.2.22 C Policy and Procedures

Compliance

8.16.2.22 D Family Handbook

Not Inspected

8.16.2.22 E Children's Records

Compliance

8.16.2.22 F Personnel Records

**Non-compliance**

*From the review of staff records, it was determined that 5 out of 8 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.*

*Corrective Action Plan*

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

Regulation: 8.16.2.22.F.1.n.

Date to be Completed: 08/18/2018

8.16.2.22 G Personnel Handbook

Not Inspected

**Personnel & Staffing**

8.16.2.23 A Personnel and Staffing Requirements

Compliance

8.16.2.23 B Staff Qualifications and Training

**Non-compliance**

*From the review of staff records, it was determined that 2 out of 8 staff working more than 20 hours a week, has/have no documentation of at least 24 hours of qualified annual training, See Staff Records 8.16.2.22 form for staff with missing documentation of training. One educator has completed 18 of the 24 hrs. and the other has completed 23 hours.*

*Corrective Action Plan*

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

Regulation: 8.16.2.23.B.2.d.

Date to be Completed: 08/18/2018

8.16.2.23 B Staff Qualifications and Training *(continued)*

**Non-compliance**

*The center failed to keep a training log on file with Employee's name, Date of hire, Position, Clock hours, Date of training, Competency area, Source of training for 2 out of 8 staff. See Staff Records 8.16.2.22 form for staff who are missing a complete training log.*

*Corrective Action Plan*

*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.*

Regulation: 8.16.2.23.B.2.I.

Date to be Completed: 08/18/2018

*The center failed to keep a training log on file with Clock hours, Competency area, Source of training, Date of training for 6 out of 8 staff. See Staff Records 8.16.2.22 form for staff who are missing a complete training log.*

*Corrective Action Plan*

*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.*

Regulation: 8.16.2.23.B.2.I.

Date to be Completed: 08/18/2018

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

Not Inspected

8.16.2.24 G Physical Environment

Not Inspected

8.16.2.24 H Social-Emotional Responsive Environment

Compliance

8.16.2.24 I Equipment and Program

**Non-compliance**

*The center did not post the daily activity schedule. Pre-K room*

*Corrective Action Plan*

*The center will begin posting their daily activities schedules and following them.*

Regulation: 8.16.2.24.I.8.

Date to be Completed: 08/18/2018

### Services & Care of Children *(continued)*

8.16.2.24 J Outdoor Play Areas	Compliance
8.16.2.24 K Swimming, Wadding 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	Not Inspected
8.16.2.26 C Medication	Not Inspected
8.16.2.27 A-D Illness Requirements for Centers	Compliance
8.16.2.28 A-H Transportation Requirements for Centers	Not Inspected

### Buildings, Grounds & Safety

8.16.2.29 A Housekeeping	<b>Non-compliance</b>
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*The Furniture are not in good repair as evidenced by vinyl sofa in the 2s room is peeling*

*Corrective Action Plan*

*Repairs will be completed and a system for routine inspection of the center and premises will be established.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 08/18/2018

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
8.16.2.29 F Exits and Windows	Compliance

**Buildings, Grounds & Safety (continued)**

**8.16.2.29 G Toilet and Bathing Facilities**

**Non-compliance**

*The toilet room for Preschool room(s) is missing soap. Hand washing sink.*

*Corrective Action Plan*

*The toilet room will be restocked and a routine established to monitor all toilet rooms for adequate supplies.*

Regulation: 8.16.2.29.G.2.

Date to be Completed: 08/18/2018

**8.16.2.29 H Safety Compliance**

**Non-compliance**

*The center failed to conduct a fire drill for the month(s) of May, June.*

Regulation: 8.16.2.29.H.2.

Date to be Completed: 08/18/2018

*The center failed to conduct an emergency preparedness practice drills for at least once a quarter.*

*Corrective Action Plan*

*A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year.*

Regulation: 8.16.2.29.H.1.

Date to be Completed: 08/18/2018

**8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances**

*Compliance*

**8.16.2.29 J Pets**

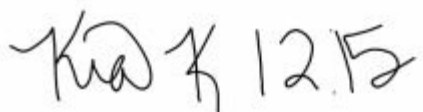
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**Additional Comments**

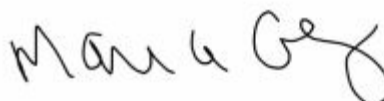
*None*

**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: *Maria C Gomez*