

Center Name: La Petite Academy Inc 7290		Address: 1501 Barbara Loop SE Rio Rancho, NM 87124			Phone: (505)891-5755		
License Number: 81452	Issue Date: 03/30/2017	Expiration Date: 03/29/2018	Type: 5 Star FOCUS Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	127	Under Age 2:	54	Night Care:	0	Playground:	127
		Over 2:	51	Under 2:	11		
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:	06:00 AM	06:00 AM	06:00 AM	06:00 AM	06:00 AM	Closed	Closed
Closing Times:	06:30 PM	06:30 PM	06:30 PM	06:30 PM	06:30 PM		
# of Classrooms: 7	Purpose: Semi-Annual		Date: 07/19/2017		Time: 10:05 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	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	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	Non-compliance

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Administrative Requirements		
<p><u>Deficiencies</u> Of the 10 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. Corrected on site.</p> <p>Regulation: 8.16.2.22E(2)(c)</p> <p><u>Corrective Action Plan</u> 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. Corrected on site.</p> <p>Date to be Completed: 07/19/2017</p>		
<p>8.16.2.22 F PERSONNEL RECORDS</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 3 out of 9 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.</p> <p>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.</p> <p>Date to be Completed: 08/19/2017</p>	Non-compliance	
<p>8.16.2.22 G PERSONNEL HANDBOOK</p>	Not Inspected	
Personnel & Staffing		
<p>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</p>	Compliance	
<p>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</p> <p><u>Deficiencies</u> Educators did not complete the following training within 3-months: Health and Safety Training</p> <p>Regulation: 8.16.2.23B(2)(b)</p> <p><u>Corrective Action Plan</u> All educators, regardless of the number of hours per week, will complete the above listed training.</p> <p>The following staff members need to complete the required training: One educator need to complete Health & Safety training.</p> <p>Date to be Completed: 08/19/2017</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 5 out of 9 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.</p> <p>Regulation: 8.16.2.23B(2)(d)</p> <p><u>Corrective Action Plan</u> Annual training will be completed as required and documentation retained on file. Director will forward training certificates of training hours.</p> <p>Date to be Completed: 08/19/2017</p>	Non-compliance	
<p>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</p>	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		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
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		Not Inspected
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 Deficiencies A food is not properly stored; the item is not labeled and dated. Cantalope in the infant refrigerator was not dated. Regulation: 8.16.2.25D(4) Corrective Action Plan The person responsible for food service will be instructed in proper food storage. Date to be Completed: 08/19/2017		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 Deficiencies The center does not have on duty all educators currently certified in first aid and cardiopulmonary resuscitation (CPR). Regulation: 8.16.2.26B(1) Corrective Action Plan All educators must be certified in first aid and cardiopulmonary resuscitation (CPR). Two educators need FA/CPR renewed. Date to be Completed: 08/19/2017		Non-compliance
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

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Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING <u>Deficiencies</u> The equipment in the infant room are not clean as evidenced by stains in the freezer and refrigerator. Regulation: 8.16.2.29A(1) <u>Corrective Action Plan</u> Cleaning will be completed and a schedule for routine cleaning will be established. Date to be Completed: 08/19/2017 <u>Deficiencies</u> The premises in the twos room are not safe in that radio cord is accessible. Regulation: 8.16.2.29A(1) <u>Corrective Action Plan</u> The safety violation will be corrected and a system for routine safety inspection developed. Date to be Completed: 08/19/2017	Non-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 <u>Deficiencies</u> The center does not have emergency lighting that turns on automatically when electrical service is disrupted. The emergency lights in Toddler Room and Pre-K room were not operable. Regulation: 8.16.2.29E(2) <u>Corrective Action Plan</u> Emergency lighting will be installed. Date to be Completed: 08/19/2017	Non-compliance	
8.16.2.29 F EXITS AND WINDOWS	Compliance	
8.16.2.29 G TOILET AND BATHING FACILITIES <u>Deficiencies</u> The toilet room for Toddler - (12 - 24 mo.) room(s) is missing soap; disposable towels. No soap and paper towel at the diaper changing station. No PT and the handwashing sink. Regulation: 8.16.2.29G(2) <u>Corrective Action Plan</u> The toilet room will be restocked and a routine established to monitor all toilet rooms for adequate supplies. Date to be Completed: 08/19/2017	Non-compliance	
8.16.2.29 H SAFETY COMPLIANCE	Non-compliance	

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Buildings, Grounds & Safety

Deficiencies

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

Regulation: 8.16.2.29H(1)

Corrective Action Plan

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

Date to be Completed: 08/19/2017

8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.29 J PETS	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 licensee.



07/19/2017



07/19/2017

Surveyor: Kia Kennedy	Date	Facility Rep: Connie Gomez	Date
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