

Center Name:			Address:				Phone:		
La Petite Academy Inc 7287			4100 New Vistas Ct Albuquerque, NM 87114				(505)898-1500		
License Number:	Issue Date:	Expiration I	Date:	Type:			Status:	•	
81447	02/1/2017	08/17/2017		5 Star FOCI	JS Child Care Center		Licensed		
Capacity				•		Cei	nsus		
Over Age 2: 225	Under Age 2:	44 Night	Care:	0 Pla	ayground: 85	Ove	r 2: 93	Under	2: 24
Days and Hours of Operation									
	<u>Monday</u>	<u>Tuesda</u>	y W	<u>/ednesday</u>	Thursday	Fri	<u>day</u>	Saturday	<u>Sunday</u>
Opening Times	06:00 AM	06:00 A	M	06:00 AM	06:00 AM	06:0	0 AM	Closed	Closed
Closing Times	: 06:30 PM	06:30 PI	M (	06:30 PM	06:30 PM	06:3	06:30 PM		
# of Classrooms: Purpose:				Date:		Ti	me:		
9 Annual			06/19/2017		09	09:30 AM			
	<u> </u>						_		

### Comments

Sout side of the playground is under construction and is not being used by children.

Fire Inspection expires 9/17.

One staff lacks Health and Safety Training and CPR.

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  Deficiencies  The center failed to post classroom capacities, and ratios and group sizes in an area of the room that is easily visible to parents, staff and visitors. In the Preschool 1 classroom.  Regulation: 8.16.2.21B(3)(c)  Corrective Action Plan  The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors.  Date to be Completed: 07/19/2017	Non-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		
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### **Administrative Requirements**

### 8.16.2.22 E CHILDREN'S RECORDS

Non-compliance

#### **Deficiencies**

Of the 31children's records reviewed, 2is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.22 form for the child(ren) with no immunization/exemption.

**Regulation:** 8.16.2.22E(1)(e)

#### **Corrective Action Plan**

Parents will be advised to submit a complete and up-to-date immunization record or exemption. The center will review all children's records to ensure complete information is on file

Date to be Completed: 07/19/2017

#### **Deficiencies**

Of the 31 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 8.16.2.22 form for the child(ren) with missing information.

**Regulation:** 8.16.2.22E(2)(b)

#### **Corrective Action Plan**

Parents will be advised to review and add missing information. The center will review all children's records to ensure up-to-date emergency contact information is on file.

Date to be Completed: 07/19/2017

### **Deficiencies**

Of the 31 children's records reviewed, 1 is/are missing a document giving the center permission to transport the child in a medical emergency and authorization for medical treatment signed by a parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

**Regulation:** 8.16.2.22E(2)(d)

#### **Corrective Action Plan**

Parents will be advised to review and add missing information. The center will review all children's records to ensure emergency medical transportation and treatment authorization is on file.

Date to be Completed: 07/19/2017

#### 8.16.2.22 F PERSONNEL RECORDS

Non-compliance

#### **Deficiencies**

From the review of staff records, it was determined that 3 out of 27 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.

Regulation: 8.16.2.22F(1)(n)

#### **Corrective Action Plan**

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

Date to be Completed: 07/19/2017

8.16.2.22 G PERSONNEL HANDBOOK

# Personnel & Staffing

Compliance

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Center Name:	License Number:	Date:		
La Petite Academy Inc 7287	81447	06/19/2017		
Personnel & Staffing				
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS			Compliance	
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING			Non-compliance	
Educators did not complete the following training within 3-months: Health and S CPR Training  Regulation: 8.16.2.23B(2)(b)  Corrective Action Plan  All educators, regardless of the number of hours per week, will complete the ab  The following staff members need to complete the required training:  Date to be Completed: 07/19/2017  Deficiencies  From the review of staff records, it was determined that 1 out of 27 staff documentation of the 45-hour entry level course or an approved equival six months of employment.  Regulation: 8.16.2.23B(2)(c)	ove listed training.  does/do not have			
Corrective Action Plan  Training will be completed for staff as required and documentation retain  Date to be Completed: 07/19/2017	ned on file .			
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES			Compliance	
Services & Care of	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 NEE	EDS		Not Inspected	
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE			Compliance	
8.16.2.24 G PHYSICAL ENVIRONMENT			Compliance	
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			Non-compliance	

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#### **Food Service**

### **Deficiencies**

The freezer in the kitchen does not keep frozen food at 0 degrees (Fahrenheit) or below.

**Regulation:** 8.16.2.25D(6)

### **Corrective Action Plan**

The center will have the freezer serviced.

Date to be Completed: 07/19/2017

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	Non-complianc		
Deficiencies  When medication is no longer needed, it is not returned to the parents or guardians or destroyed but it remains in the center. Expired albuteral for child who is not attending during the summer.  Regulation: 8.16.2.26C(5)  Corrective Action Plan  Medication no longer needed or expired will be returned to the parents or guardians or destroyed. Corrected on site.  Date to be Completed: 07/19/2017			
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS	Compliance		
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS	Complianc		
Buildings, Grounds & Safety			

#### buildings, Grounds & Salety

## 8.16.2.29 A HOUSEKEEPING Non-compliance

## **Deficiencies**

The Equipment are not in good repair as evidenced by cracked plastic cubby holding he "wild animals".Preschool 1.

**Regulation:** 8.16.2.29A(1)

## **Corrective Action Plan**

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

Date to be Completed: 07/19/2017

### **Deficiencies**

The Furniture are not in good repair as evidenced by the blue chair is torn in the dramatic play area.. 2's classroom.

**Regulation:** 8.16.2.29A(1)

## **Corrective Action Plan**

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

Date to be Completed: 07/19/2017

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### **Buildings, Grounds & Safety**

### **Deficiencies**

The Equipment are not in good repair as evidenced by the sliding door under the changing table does not slide open easily. 2's classroom.

**Regulation:** 8.16.2.29A(1)

#### **Corrective Action Plan**

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

Date to be Completed: 07/19/2017

#### **Deficiencies**

The premises in the Toddler Room are not safe in that the radio cord is not secure..

**Regulation:** 8.16.2.29A(1)

### **Corrective Action Plan**

The safety violation will be corrected and a system for routine safety inspection developed.

Date to be Completed: 07/19/2017

### **Deficiencies**

The floors in the 2's classroom are not clean as evidenced by the green rug has multiple stains.

 $\textbf{Regulation:}\ 8.16.2.29A(1)$ 

### **Corrective Action Plan**

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 07/19/2017

8.16.2.29 B PEST CONTROL	Compliance
8.16.2.29 C MECHANICAL SYSTEMS	Non-compliance
<u>Deficiencies</u>	
The temperature in rooms used by children exceeds 82 degrees Fahrenheit.	
<b>Regulation:</b> 8.16.2.29C(1)	
Corrective Action Plan	
A temperature between 68 degrees through 82 degrees Fahrenheit will be maintained in all	
rooms used by children.	
Date to be Completed: 07/19/2017	
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	Non-compliance
<u>Deficiencies</u>	
Exits are not marked with signs having letters at least six inches high and 3/4 inch wide in	
the Infant - (6 wk 12 mo.); 2 yr. old; Preschool class room(s). Lacks 2nd exit sign.	
<b>Regulation:</b> 8.16.2.29F(2)(a)	
Corrective Action Plan	
Exit signs that meet requirements will be placed at all exits.	
Date to be Completed: 07/19/2017	
8.16.2.29 G TOILET AND BATHING FACILITIES	Compliance
8.16.2.29 H SAFETY COMPLIANCE	Compliance

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Buildings, Grounds & Safety					
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	AND CONTROLLED SUBSTANC	ES	Compliance		
8.16.2.29 J PETS			Compliance		

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.

06/19/2017

for mornin Nieto

06/19/2017

Surveyor:Darlene Montoya

Date

Facility Rep:Monica Nieto

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Date