



Facility

Name: *La Petite Academy Inc 7288* **License Number:** *81444*
Address: *12215 Towner NE, Albuquerque, NM 87112*
Phone: *5052943703* **Fax:** *na* **E-mail:** *7288@lapetite.com*

License Information

Type: *5 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *08/28/2018* **Expiration Date:** *08/27/2019*

Capacity

Over Age 2: *105* **Under Age 2:** *30* **Night Care:** *0* **Playground:** *135*
Square Footage: *0*

Census

Over 2: *35* **Under 2:** *15*

Classrooms

Number of Classrooms: *6*

Days and Hours of Operation

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

Inspection

Date: *01/29/2019* **Time In:** *9:30 AM* **Time Out:** *12:30 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>Not Inspected</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>

Licensure (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 *Not Inspected*

8.16.2.22 D Family Handbook *Not Inspected*

8.16.2.22 E Children's Records **Non-compliance**

Of the 10 children's records reviewed, 2 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.

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.

Regulation: 8.16.2.22.E.1.e.

Date to be Completed: 02/28/2019

8.16.2.22 F Personnel Records **Non-compliance**

From the review of staff records, it was determined that 1 out of 13 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: 02/28/2019

8.16.2.22 G Personnel Handbook *Not Inspected*

Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements *Compliance*

Personnel & Staffing (continued)

8.16.2.23 B Staff Qualifications and Training

Non-compliance

Educators did not complete the following training within 3-months: Health and Safety Training, 2 educators

Corrective Action Plan

All educators, regardless of the number of hours per week, will complete the above listed training. The following staff members need to complete the required training:

Regulation: 8.16.2.23.B.2.b.

Date to be Completed: 02/28/2019

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

Not Inspected

8.16.2.24 F Additional Requirements for Night Care

N/A

8.16.2.24 G Physical Environment

Compliance

8.16.2.24 H Social-Emotional Responsive Environment

Not Inspected

8.16.2.24 I Equipment and Program

Compliance

8.16.2.24 J Outdoor Play Areas

Non-compliance

The fall zone underneath the [NW side slide] is not adequate as evidenced by the resilient material is not uniformly spread over the fall zone area.

Corrective Action Plan

An approved resilient surface will be provided beneath the climbing structures, swings, and slides.

Regulation: 8.16.2.24.J.3.

Date to be Completed: 02/28/2019

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

Food Service (continued)

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	Not Inspected
8.16.2.28 A-H Transportation Requirements for Centers	Not Inspected

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping	Non-compliance
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The [premises] are not in good repair as evidenced by baseboard in the 2s bathroom is detaching from wall.

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: 02/28/2019

The premises in the center are not clean as evidenced by unclean vents.

Corrective Action Plan

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

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/28/2019

The floors in the 2s bathroom are not clean as evidenced by caked grime all around near the base of walls.

Corrective Action Plan

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

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/28/2019

8.16.2.29 A Housekeeping (continued)

Non-compliance

The premises in the school age room are not safe in that a soap/liquid spray bottle solution sits on the floor accessible to children.

Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed. Violation corrected while inspector was still present.

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/28/2019

The cieling tiles in the 3s room are not clean as evidenced by accumulation of grime/dust.

Corrective Action Plan

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

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/28/2019

The premises are not in good repair as evidenced by wall chipping paint in the 3s room.

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: 02/28/2019

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

8.16.2.29 G Toilet and Bathing Facilities

Compliance

8.16.2.29 H Safety Compliance

Compliance

8.16.2.29 H3(f)(i)(k) Safety Compliance

Compliance

8.16.2.29 J Pets

N/A

Additional Comments

This is a semi annual inspection. Fire extinguishers are due for re inspection March 2019.

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: *Sylvia Foster*



Facility Representative: *Kelly S Ullom*