



Facility

Name: *La Petite Academy Inc 7289* **License Number:** *11820*
Address: *2800 Southern Blvd, Rio Rancho, NM 87124*
Phone: *5058924644* **Fax:** **E-mail:** *7289@lapetite.com*

License Information

Type: *5 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *06/09/2017* **Expiration Date:** *06/08/2018*

Capacity

Over Age 2: *97* **Under Age 2:** *11* **Night Care:** *0* **Playground:** *108*
Square Footage: *0*

Census

Over 2: *48* **Under 2:** *6*

Classrooms

Number of Classrooms: *5*

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: *04/09/2018* **Time In:** *10:45 AM* **Time Out:** *1:00 PM* **Purpose:** *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>Compliance</i>
8.16.2.21 B Capacity of Centers	<i>Compliance</i>
8.16.2.21 C Incident Reporting Requirements	<i>Not Inspected</i>

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	Non-compliance

Of the 20 children's records reviewed, 1 is/are missing the date the child first attended the center. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

Corrective Action Plan

The first attendance date will be added and the center will review all children's records to ensure complete information is on file.

Date to be Completed: 05/09/2018

Of the 20 children's records reviewed, 3 is/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.

Date to be Completed: 05/09/2018

Of the 20 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.

Corrective Action Plan

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.

Date to be Completed: 05/09/2018

8.16.2.22 E Children's Records (continued)**Non-compliance**

Of the 20 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.

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: 05/09/2018

Of the 20 children's records reviewed, 1 is/are missing information on allergies or medical conditions. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all records to ensure information regarding allergies and medical conditions is on file.

Date to be Completed: 05/09/2018

8.16.2.22 F Personnel Records**Non-compliance**

From the review of staff records, it was determined that 1 out of 7 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.

Date to be Completed: 05/09/2018

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 1 educator will complete Health & Safety Training

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: One educator will complete Health & Safety Training

Date to be Completed: 05/09/2018

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

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

Non-compliance

Play equipment and materials in the Toddler - (12 - 24 mo.) room/area are not accessible to children, including those with disabilities, as evidenced by a storage closet that children are not permitted to enter. The restroom was used to store toys, rest cots and boxes.

Corrective Action Plan

Staff will be instructed to reorganize storage so children, including those with disabilities, can select and replace materials by themselves or with minimal assistance.

Date to be Completed: 05/09/2018

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

Food Service (continued)

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	Compliance
8.16.2.26 C Medication	Compliance
8.16.2.27 A-D Illness Requirements for Centers	Compliance
8.16.2.28 A-H Transportation Requirements for Centers	Non-compliance

A vehicle used for transporting children is not equipped with water. Bus 3221

Corrective Action Plan

The vehicle will be equipped with required items.

Date to be Completed: 05/09/2018

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping	Non-compliance
--------------------------	-----------------------

The Ceiling tiles are not in good repair as evidenced by a ceiling tile installed properly (exposed wood beam)

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: 05/09/2018

8.16.2.29 B Pest Control	Not Inspected
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	Non-compliance

The toilet room for Toddler - (12 - 24 mo.) room(s) is missing disposable towels.

Corrective Action Plan

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

Date to be Completed: 05/09/2018

Buildings, Grounds & Safety (continued)**8.16.2.29 H Safety Compliance****Non-compliance**

The center's fire extinguishers is not inspected yearly. The kitchen fire extinguisher tagged Nov. 2016 as well as the fire extinguishers in buses 3217 & 3221.

Corrective Action Plan

Equipment will be maintained and inspected yearly.

Date to be Completed: 05/09/2018

8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances*Compliance***8.16.2.29 J Pets***Not Inspected***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: *DeAnn Lopez*

