

Center Name:  La Petite Academy Inc.	: 7289		Address: 2800 South Rio Rancho					<b>Phone:</b> (505)892-4	1644
License Number:	Issue Date:	Expiration I	Date:	Туре:			Status:	•	
11820	02/1/2017	06/8/2017		5 Star FOC	US Child Care Center		Licensed		
Capacity				•		Cei	nsus		
Over Age 2: 97	Under Age 2:	11 Night	Care:	0 PI	ayground: 108	Ove	er 2: 3	3 Und	der 2: 5
Days and Hours of	Operation								
	<u>Monday</u>	Tuesda	<u>y</u> <u>W</u>	<u>'ednesday</u>	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times	: 06:00	06:00	(	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	0 PM		
# of Classrooms:	F	Purpose:			Date:		1	Time:	
5	A	Annual			04/08/2017		0	9:45 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  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. (Pe-K room) 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: 05/07/2017	Non-compliance		
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected		
Administrative Requirements			
8.16.2.22 A ADMINISTRATION RECORDS	Non-compliance		

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## **Administrative Requirements**

#### **Deficiencies**

The center failed to display in a prominent place that is readily visible to parents, staff and visitors the guidance policy.

Regulation: 8.16.2.22A

#### **Corrective Action Plan**

The center will post the missing item.

Date to be Completed: 05/07/2017

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

### Deficiencies

Of the 20 children's records reviewed, 4 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.

**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: 05/07/2017

## **Deficiencies**

Of the 20 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: 05/07/2017

#### **Deficiencies**

Of the 20 children's records reviewed, 3 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.

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

## **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: 05/07/2017

8.16.2.22 F PERSONNEL RECORDS Non-compliance

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# **Administrative Requirements**

#### **Deficiencies**

From the review of staff records, it was determined that 2 out of 6 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.

**Regulation:** 8.16.2.22F(1)(P)

### **Corrective Action Plan**

The center will have staff complete the required acknowledgement and will retain on file.

Date to be Completed: 05/07/2017

### **Deficiencies**

From the review of staff records, it was determined that 4 out of 6 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: 05/07/2017

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	Compliance
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Non-compliance
<u>Deficiencies</u> The center failed to post the capacity for each activity/interest area. 2 out of 5 classrooms failed to post the capacity for each activity/interest area. (Twos room, School age room)  Regulation: 8.16.2.23 C (2)(b)	
Corrective Action Plan  Each activity/interest area will have a posted capacity, which may vary according to the activity and size of the space, and will not exceed the group size requirement as specified in Paragraph (1) of Subsection C of 8.16.2.23 NMAC  Date to be Completed: 05/07/2017	
Services & Care of Children	•
8.16.2.24 A GUIDANCE	Non-compliance
<u>Deficiencies</u>	
Of the 20 children's records reviewed, 2 is/are missing a signed parent or guardian	
acknowledgement that the center's guidance policy had been read and understood. See the	
Children's Records 8.16.2.22 form for the child(ren) who have this missing.	
Regulation: 8.16.2.24A(1)	
Corrective Action Plan	
The center will review all children's records to ensure a signed parent or guardian	
acknowledgement is on file.	
Date to be Completed: 05/07/2017	
8.16.2.24 B NAPS OR REST PERIOD	Compliance

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Services & Care	of Children		
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 N	EEDS		Compliance
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			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 Se	rvice		
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 F	Requirements		
8.16.2.26 A HYGIENE			Compliance
8.16.2.26 B FIRST AID REQUIREMENTS			Compliance
8.16.2.26 C MEDICATION			Non-compliance
Deficiencies The center does not have the written permission of parents or guardial prescribing physician to administer medication. (Benadryl, Epi-pen)  Regulation: 8.16.2.26C(2)  Corrective Action Plan  Written permission and instructions for administration from the prescription obtained from parents/guardians prior to administering any prescription or non-prescription or non-prescr	bing physician will be cription medication.		
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS			Compliance
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS			Non-compliance

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# **Health & Safety Requirements**

# **Deficiencies**

The vehicle used for transporting children does not have current registration. Bus 351 has expired sticker tabs, however the registration is current.

Regulation: 8.16.2.28H

# **Corrective Action Plan**

current registration will be obtained. Program will not drive bus 351 until tabs are received.

Date to be Completed: 05/07/2017

Buildings, Grounds & Safety	
8.16.2.29 A HOUSEKEEPING	Non-compliance
Deficiencies	Tron compilation
The premises in the Early Preschool area are not safe in that radio cord is accessible and	
not secured.	
<b>Regulation:</b> 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: 05/07/2017	
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	Non-compliance
<u>Deficiencies</u>	
The center does not have emergency lighting that turns on automatically when electrical	
service is disrupted. The emergency lights above the exit door in the school age room was	
not operable.	
<b>Regulation:</b> 8.16.2.29E(2)	
Corrective Action Plan	
Emergency lighting will be installed.	
Date to be Completed: 05/07/2017	
8.16.2.29 F EXITS AND WINDOWS	Compliance
8.16.2.29 G TOILET AND BATHING FACILITIES	Non-compliance
<u>Deficiencies</u>	
The toilet room for 2 yr. old room(s) is missing toilet paper. Corrected on site.	
Regulation: 8.16.2.29G(2)	
Corrective Action Plan	
The toilet room will be restocked and a routine established to monitor all toilet rooms for	
adequate supplies. Corrected on site.	
Date to be Completed: 04/07/2017	
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: 05/07/2017

1.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliand
3.16.2.29 J PETS	N/

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.

04/08/2017

04/08/2017

Date

Surveyor:Kia Kennedy

Date

Facility Rep:DeAnn Lopez

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