Facility

Name: La Puerta de Los Ninos License Number: 28587

Address: 3001 Trellis Dr. NW, Albuquerque, NM 87107

Phone: 5058842999 Fax: E-mail: lapuertadelosninos@gmail.com

License Information

Type: 2 Star Child Care Status: Licensed Issue Date: 09/03/2017 Expiration Date:

Center 09/02/2018

Capacity

Over Age 2: 94 Under Age 2: 23 Night Care: 0 Playground: 103

Square Footage: 0

Census

Over 2: 68 Under 2: 14

Classrooms

Number of Classrooms: 7

Days and Hours of Operation

Monday Tuesday Wednesday Thursday Friday

Saturday Sunday
Closed Closed

Inspection

Date: 07/02/2018 Time In: 9:15 AM Time Out: 12:45 PM Purpose: Annual

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

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Administrative Requirements (continued)

8.16.2.21 C Incident Reporting Requirements

Not Inspected

Administrative Requirements

8.16.2.22 A Administrative Records

Non-compliance

The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent environmental health inspection report.

Corrective Action Plan

The center will post the missing item.

Regulation: 8.16.2.22.A.

Date to be Completed: *08/01/2018*

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

8.16.2.22 E Children's Records

Non-compliance

Of the 13 children's records reviewed, 1 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.

Regulation: 8.16.2.22.E.1.e.

Date to be Completed: 08/01/2018

Of the 13 children's records reviewed, 1 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.

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.

Regulation: *8.16.2.22.E.2.b.*

Date to be Completed: 08/01/2018

8.16.2.22 E Children's Records (continued)

Non-compliance

Of the 13 children's records reviewed, 2 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. Missing doctor # only.

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.

Regulation: 8.16.2.22.E.2.c.

Date to be Completed: 08/01/2018

Of the 13 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.

Regulation: 8.16.2.22.E.2.a.

Date to be Completed: *08/01/2018*

8.16.2.22 F Personnel Records

Non-compliance

From the review of staff records, it was determined that 5 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: 08/01/2018

8.16.2.22 G Personnel Handbook

Compliance

Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements

Compliance

8.16.2.23 B Staff Qualifications and Training

Non-compliance

From the review of staff records, it was determined that 3 out of 8 staff does/do not have documentation of the 45-hour entry level course or an approved equivalent prior to or within six months of employment.

Corrective Action Plan

Training will be completed for staff as required and documentation retained on file.

(continued)

Regulation: 8.16.2.23.B.2.c. Date to be Completed: 08/01/2018

From the review of staff records, it was determined that 7 out of 8 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.

Corrective Action Plan

Annual training will be completed as required and documentation retained on file.

Regulation: 8.16.2.23.B.2.d. Date to be Completed: 08/01/2018

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	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, Wadding and Water	Compliance
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 Non-compliance

A food is not properly stored; the item is not wrapped, labeled and dated. Beans not labeled, rice not stored properly.

Corrective Action Plan

The person responsible for food service will be instructed in proper food storage.

Regulation: 8.16.2.25.D.4.

Date to be Completed: 08/01/2018

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 N/A

8.16.2.27 A-D Illness Requirements for Centers Compliance

8.16.2.28 A-H Transportation Requirements for Centers

N/A

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping

Non-compliance

The peacock classroom

has a heavy accumulation of storage in the loft area

.

Corrective Action Plan

A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards.

Regulation: 8.16.2.29.A.1.

Date to be Completed: 08/01/2018

The pumpkin eater

has a heavy accumulation of storage on the sink for hand washing

.

Corrective Action Plan

A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards.

Regulation: 8.16.2.29.A.1. Date to be Completed: 08/01/2018

8.16.2.29 A Housekeeping (continued)

Non-compliance

The Furnitureare not in good repair as evidenced by in the peacocks classroom the handle to the refrigerator has come detached.

.

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: 08/01/2018

The premises in the the east playground

are not safe in that there are sand wasps on the playground around the play structure

.

Corrective Action Plan

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

Regulation: 8.16.2.29.A.1.

Date to be Completed: 08/01/2018

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

Non-compliance

The center does not have verification of an annual fire inspection from the fire authority having jurisdiction.

Corrective Action Plan

An annual fire inspection will be requested from the fire authority having jurisdiction over the center.

Regulation: 8.16.2.29.H.3.e.

Date to be Completed: 08/01/2018

8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

Compliance

8.16.2.29 J Pets Compliance

Additional Comments

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: Darlene Montoya

Facility Representative: Sarah Torrey