



**Facility**

**Name:** *La Vida Felicidad Inc.* **License Number:** *94693*  
**Address:** *530 Sun Ranch Village Rd, Los Lunas, NM 87031*  
**Phone:** *5058654651* **Fax:**  **E-mail:** *n/a*

**License Information**

**Type:** *4 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *08/15/2018* **Expiration Date:** *08/14/2019*

**Capacity**

**Over Age 2:** *58* **Under Age 2:** *12* **Night Care:** *0* **Playground:** *70*  
**Square Footage:** *0*

**Census**

**Over 2:** *28* **Under 2:** *7*

**Classrooms**

**Number of Classrooms:** *4*

**Days and Hours of Operation**

<b>Monday</b> <i>7:00 AM - 6:00 PM</i>	<b>Tuesday</b> <i>7:00 AM - 6:00 PM</i>	<b>Wednesday</b> <i>7:00 AM - 6:00 PM</i>	<b>Thursday</b> <i>7:00 AM - 6:00 PM</i>	<b>Friday</b> <i>7:00 AM - 6:00 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

**Inspection**

**Date:** *11/19/2018* **Time In:** *9:30 AM* **Time Out:** *12:30 PM* **Purpose:** *Semi-annual*

**Licensing:**

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*

**Licensing Actions and Administrative Appeals:**

8.16.2.12 A, K, M Licensing Actions and Administrative Appeals *Not Inspected*

**Surveys for Child Care Facilities:**

8.16.2.17 E, F Surveys for Child Care Facilities

*Not Inspected***Complaints:**

8.16.2.18 D Complaints

*Not Inspected***Licensure Requirements for Centers:**

8.16.2.21 A Licensing Requirements

*Compliance*

8.16.2.21 B Capacity of Centers

*Compliance*

8.16.2.21 B (3)c Capacity of Centers

*Compliance*

8.16.2.21 C Incident Reporting Requirements

*Not Inspected***Administrative Requirements for Centers:**

8.16.2.22 A Administrative Records

***Non-compliance*****Admin/Licensure**

8.16.2.22.A.:Administrative Records: A licensee will display in a prominent place that is readily visible to parents, staff and visitors:

**Finding****Deadline: 12/19/2018**

The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent licensing survey.

**Corrective Action Plan**

The center will post the missing item.

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

*Compliance*

8.16.2.22 F Personnel Records

***Non-compliance*****Personnel**

8.16.2.22.F.1.d.:dates of hire and termination;

## Personnel (continued)

**Finding****Deadline: 12/19/2018**

*From the review of staff records, it was determined that 2 out of 4 staff records does/do not include dates of hire and termination. See Staff Records 8.16.2.22 form for staff with this missing information.*

**Corrective Action Plan**

*The center will add dates of hire and termination to the record.*

**8.16.2.22.F.1.e.:** documentation of a background check and employment history verification; if background check is in process then documentation showing that it is in process, such as a submission receipt, shall be placed in file. A background check must be conducted at least once every five (5) years on all required individuals;

**Finding****Deadline: 12/19/2018**

*From the review of staff records, it was determined that 2 out of 4 staff records does/do not include a background check or a receipt of a background check. See Staff Records 8.16.2.22 form for staff with this missing information.*

**Corrective Action Plan**

*The center will obtain documentation of a background check.*

**8.16.2.22.F.1.g.:** documentation of current first-aid and cardiopulmonary resuscitation training;

**Finding****Deadline: 12/19/2018**

*From the review of staff records, it was determined that 1 out of 4 staff records does/do not include documentation of current first-aid and cardiopulmonary resuscitation training. See Staff Records 8.16.2.22 form for staff without verification of training.*

**Corrective Action Plan**

*The center will obtain documentation of first-aid and CPR training and retain on file.*

**8.16.2.22.F.1.i.:** emergency contact number;

**Finding****Deadline: 12/19/2018**

*From the review of staff records, it was determined that 1 out of 4 staff records does/do not include an emergency contact number. See Staff Records 8.16.2.22 form for staff with this missing information.*

**Corrective Action Plan**

*The center will have staff complete required information.*

**8.16.2.22.F.1.h.:** documentation of all appropriate training by date, time, hours and area of competency;

Personnel (continued)

**Finding**

**Deadline: 12/19/2018**

*From the review of staff records, it was determined that 2 out of 4 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.22 form for staff with missing documentation. Some new staff had training, but those training's were not logged.*

*Corrective Action Plan*

*The center will obtain verification of all training and retain on file.*

**8.16.2.22.F.1.n.:** *written plan for ongoing professional development for each educator, including the director, that is based on the seven areas of competency, consistent with the career lattice, and based on the individual's goals; and*

**Finding**

**Deadline: 12/19/2018**

*From the review of staff records, it was determined that 1 out of 4 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. New staff professional development plan were left blank.*

*Corrective Action Plan*

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

**8.16.2.22.F.1.p.:** *signed acknowledgement that all staff have reviewed and are aware of the center's disaster preparedness plan and evacuation plan.*

**Finding**

**Deadline: 12/19/2018**

*From the review of staff records, it was determined that 2 out of 4 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed. New staff new employee orientation were not present or not fill out completely.*

*Corrective Action Plan*

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

**8.16.2.22 G Personnel Handbook**

*Not Inspected*

**Personnel and Staffing Requirements for Centers:**

**8.16.2.23 A Personnel and Staffing Requirements**

*Compliance*

**8.16.2.23 B Staff Qualifications and Training**

***Non-compliance***

Personnel

## Personnel (continued)

8.16.2.23.B.2.b.:All new educators regardless of the number of hours per week will complete the following training within three (3) months of their date of hire. All current educators will have three months to comply with the following training from the date these regulations are promulgated:

## Finding

Deadline: 12/19/2018

Educators did not complete the following training within 3-months: **1st aid/CPR Training** and the **Health and 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:

8.16.2.23 C Staff/Child Ratios and Group Sizes

Compliance

## Services and Care of Children in Centers:

8.16.2.24 A Guidance

Compliance

8.16.2.24 A1 Guidance

**Non-compliance**

## Admin/Licensure

8.16.2.24.A.1.:A center will have written policies and procedures clearly outlining guidance practices. Centers will give this information to all parents and staff who will sign a form to acknowledge that they have read and understand these policies and procedures.

## Finding

Deadline: 12/19/2018

Of the 4 staffs records reviewed, 2 is/are missing a signed staff 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.

## Corrective Action Plan

The center will review all staffs records to ensure a signed staff acknowledgement is on file.

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 G Physical Environment

## 4/5 Classroom

8.16.2.24.G.2.:Each center is clearly defined, using shelves and furniture.

4/5 Classroom (continued)

**Finding**

**Deadline: 12/19/2018**

*Learning centers/areas in the 4/5 yr. old class room(s) do not make use of the shelves or furniture available in the classroom to clearly define the learning centers/areas.*

*Corrective Action Plan*

*Shelves and/or furniture will be [ ] to clearly define learning centers/areas.*

**8.16.2.24.G.1.:***Environment shall be organized into age appropriate functional identifiable learning areas. If any of the selected learning areas are not represented at a given time, the areas shall be rotated to provide children with the opportunity to gain skills supported by a variety of learning experiences. The areas may include:*

**Finding**

**Deadline: 12/19/2018**

*Functional identifiable learning areas are not provided in the 4/5 yr. old class room(s).*

*Corrective Action Plan*

*The classroom(s) will be rearranged to provide identifiable learning centers/areas.*

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 L Field Trips	Not Inspected

**Food Service Requirements for Centers:**

8.16.2.25 A Meal Pattern Requirements	Compliance
8.16.2.25 B Meals and Snacks	Compliance
8.16.2.25 B3 Meals and Snacks	Compliance
8.16.2.25 C Menus	Compliance
8.16.2.25 D Kitchens	<b>Non-compliance</b>

Food Service

**8.16.2.25.D.4.:***A center will protect food and drink by properly storing items in an airtight container or by tightly wrapping them. A center will label and date all leftover food.*

## Food Service (continued)

## Finding

Deadline: 12/19/2018

*A drink is not properly stored; the item is not labeled and dated. Milk in a small container in the infant room fridge was not labeled/dated.*

## Corrective Action Plan

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

8.16.2.25 E Meal Times

Compliance

## Health and Safety Requirements for Centers:

8.16.2.26 A Hygiene

Compliance

8.16.2.26 B First Aid Requirements

Compliance

8.16.2.26 C Medication

Compliance

## Illness Requirements for Centers:

8.16.2.27 A-D Illness Requirements for Centers

Compliance

## Building, Ground and Safety Requirements for Centers:

8.16.2.29 A Housekeeping

Compliance

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

## I/T Classroom

*8.16.2.29.F.2.a.:All exits must be marked, including fire exits, by signs having letters at least six inches high whose principal strokes are at least three-fourths of an inch wide.*

## Finding

Deadline: 12/19/2018

*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.) class room(s).*

## Corrective Action Plan

*Exit signs that meet requirements will be placed at all exits.*

**Building, Ground and Safety Requirements for Centers: (continued)****8.16.2.29 G Toilet and Bathing Facilities****Bathroom**

8.16.2.29.G.2.: All toilet rooms will have toilet paper, soap and disposable towels at a height accessible to children. A center will not use a common towel or wash cloth.

**Finding****Deadline: 12/19/2018**

The toilet room for Pre-K class room(s) is missing toilet paper.

**Corrective Action Plan**

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

**8.16.2.29 H Safety Compliance***Compliance***8.16.2.29 H3(f)(i)(k) Safety Compliance***Compliance***8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances***Compliance***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: Mark Prizzi



Facility Representative: Clarissa Franco Cindy Ortiz