



Facility

Name: *Los Lunas Schools/KGallegos Elem* **License Number:** *72505*
Address: *236 Don Pasqual, Los Lunas, NM 87031*
Phone: *5058657335* **Fax:** **E-mail:** *n/a*

License Information

Type: *2 Star Child Care Center* **Status:** *Licensed* **Issue Date:** *08/12/2017* **Expiration Date:** *08/11/2018*

Capacity

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

Census

Over 2: *27* **Under 2:** *0*

Classrooms

Number of Classrooms: *1*

Days and Hours of Operation - Morning

Monday <i>Closed</i>	Tuesday <i>Closed</i>	Wednesday <i>Closed</i>	Thursday <i>Closed</i>	Friday <i>Closed</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Days and Hours of Operation - Afternoon

Monday <i>3:30 PM - 6:00 PM</i>	Tuesday <i>3:30 PM - 6:00 PM</i>	Wednesday <i>3:30 PM - 6:00 PM</i>	Thursday <i>3:30 PM - 6:00 PM</i>	Friday <i>3:30 PM - 6:00 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *06/12/2018* **Time In:** *1:00 PM* **Time Out:** *3:00 PM* **Purpose:** *Annual*

Licensure

8.16.2.40 A Licensing Requirements	Compliance
8.16.2.40 B Capacity of a Program	Compliance
8.16.2.40 C,D Incident Reporting Requirements	Not Inspected

Administrative Requirements

8.16.2.41 A Administrative Records	Non-compliance
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The program failed to display in a prominent place the dated weekly menus for meals and snacks.

Corrective Action Plan

The program will post the missing item(s).

Regulation: 8.16.2.41.A.

Date to be Completed: 07/12/2018

8.16.2.41 B Mission, Philosophy and Curriculum Statement	Compliance
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8.16.2.41 C Parent Handbook	Compliance
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8.16.2.41 D Children's Records	Non-compliance
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Of the 10 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 8.16.2.41 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The program will review all children's records to ensure contact information for a physician or medical center is on file.

Regulation: 8.16.2.41.D.2.b.

Date to be Completed: 07/12/2018

Of the 10 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 8.16.2.41 form for the child(ren) with missing information. Parents listed themselves as emergency contacts. Need to list 2 non-parents.

Corrective Action Plan

Parents will be advised to review and add missing information. The program will review all children's records to ensure up-to-date emergency contact information is on file.

Regulation: 8.16.2.41.D.2.a.

Date to be Completed: 07/12/2018

Administrative Requirements *(continued)*

8.16.2.41 E Personnel Records

Non-compliance

From the review of staff records, it was determined that 2 out of 8 staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.41 form for staff with this missing information.

Corrective Action Plan

The program will add staff's current and past duties and responsibilities to the record.

Regulation: 8.16.2.41.E.1.c.

Date to be Completed: 07/12/2018

From the review of staff records, it was determined that 2 out of 8 staff records does/do not include dates of hire and termination. See Staff Records 8.16.2.41 form for staff with this missing information.

Corrective Action Plan

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

Regulation: 8.16.2.41.E.1.d.

Date to be Completed: 07/12/2018

From the review of staff records, it was determined that 2 out of 8 staff records does/do not include a background check onsite. See Staff Records 8.16.2.41 form for staff with this missing information. Educator passed background check but letter not present

Corrective Action Plan

The program will obtain documentation of a background check.

Regulation: 8.16.2.41.E.1.e.

Date to be Completed: 07/12/2018

From the review of staff records, it was determined that 2 out of 8 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.41 form for staff with missing documentation.

Corrective Action Plan

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

Regulation: 8.16.2.41.E.1.h.

Date to be Completed: 07/12/2018

8.16.2.41 E Personnel Records (continued)**Non-compliance**

From the review of staff records, it was determined that not all staff, including substitutes and volunteers who have direct contact with the children, does/do not have a complete file as required in 8.16.2.42E. See Staff Records 8.16.2.41 form for staff with an incomplete file.

Corrective Action Plan

The program will complete a file for each staff including substitutes and volunteers.

Regulation: 8.16.2.41.E.1.

Date to be Completed: 07/12/2018

8.16.2.41 F Personnel Handbook

Compliance

Personnel & Staffing**8.16.2.42 A Personnel and Staffing Requirements**

Compliance

8.16.2.42 B Staff Qualifications

Compliance

8.16.2.42 C Training**Non-compliance**

New educators did not complete the Health and Safety Training, First Aid and cardiopulmonary resuscitation (CPR) certification training.

Corrective Action Plan

All educators, regardless of the number of hours per week, will complete the above listed training.

Regulation: 8.16.2.42.C.2.

Date to be Completed: 07/12/2018

Services & Care of Children**8.16.2.43 A Guidance**

Compliance

8.16.2.43 B Physical Environment

Compliance

8.16.2.43 C Social-Emotional Responsive Environment

Compliance

8.16.2.43 D Equipment and Program

Compliance

8.16.2.43 E Additional Requirements for Children with Special Needs

Compliance

8.16.2.43 F Outdoor Play Areas

Compliance

8.16.2.43 G Swimming, Wading and Water

N/A

8.16.2.43 H Field Trips

Not Inspected

Food Service**8.16.2.44 B Meals and Snacks**

Compliance

Food Service (continued)

8.16.2.44 C Kitchens

Non-compliance

The kitchen freezer does not have a working thermometer.

Corrective Action Plan

A working thermometer will be obtained and placed in the unit.

Regulation: 8.16.2.44.C.6.

Date to be Completed: 07/12/2018

Health & Safety Requirements

8.16.2.45 A Hygiene

Compliance

8.16.2.45 B First Aid Requirements

Compliance

8.16.2.45 C Medication

N/A

8.16.2.45 D Illnesses

Compliance

8.16.2.46 A-H Transportation Requirements

N/A

Buildings, Grounds & Safety

8.16.2.47 A Housekeeping

Non-compliance

The premises in the cafeteria are not safe in that hand sanitizer is too low and accessible to children without adult supervision.

Corrective Action Plan

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

Regulation: 8.16.2.47.A.1.

Date to be Completed: 07/12/2018

8.16.2.47 B Pest Control

Compliance

8.16.2.47 C Mechanical Systems

Compliance

8.16.2.47 D Lighting, Lighting Fixtures and Electrical

Compliance

8.16.2.47 E Exits and Windows

Compliance

8.16.2.47 F Toilet and Bathing Facilities:

Compliance

Buildings, Grounds & Safety (continued)**8.16.2.47 G Safety Compliance:****Non-compliance**

The program failed to conduct a fire drill for the month(s) of March, May.

Corrective Action Plan

A monthly fire drill will be held and recorded.

Regulation: 8.16.2.47.G.2.

Date to be Completed: 07/12/2018

8.16.2.47 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances**Compliance****8.16.2.47 I Pets****N/A****Additional Comments**

Visit conducted during summer program

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: Deborah Jones Adrianna
Avent