

Center Name: Los Lunas Schools/KGallegos Elem		Address: 236 Don Pasqual Los Lunas, NM 87031			Phone: (505)865-7335			
License Number: 72505	Issue Date: 08/12/2016	Expiration Date: 08/11/2017	Type: 2 Star Child Care Center		Status: Licensed			
Capacity					Census			
Over Age 2:	70	Under Age 2:	0	Night Care:	0	Playground:	70	
					Over 2:	22	Under 2:	0
Days and Hours of Operation								
Morning		<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:							Closed	Closed
Closing Times:								
Afternoon		<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:		03:30 PM	03:30 PM	03:30 PM	03:30 PM	03:30 PM		
Closing Times:		06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
# of Classrooms: 6		Purpose: Annual		Date: 06/12/2017		Time: 12:30 PM		
Comments								

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure

8.16.2.40 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 ADMINISTRATION RECORDS <u>Deficiencies</u> The program failed to display in a prominent place the last inspection/survey. Regulation: 8.16.2.41A <u>Corrective Action Plan</u> The program will post the missing item(s). Date to be Completed: 07/12/2017	Non-compliance
8.16.2.41 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.41 C PARENT HANDBOOK	Non-compliance

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Administrative Requirements

Deficiencies
The program did not have a parent handbook that included policies and procedures. The program's policies and procedures regarding the following need to be included: emergency procedures, safety policies, and disaster preparedness plan, which shall include steps for evacuation, relocation and reunification with parents, and **individual plans for children with special needs; and an Expulsion policy.**

Regulation: 8.16.2.41C(1)(2)

Corrective Action Plan
A parent handbook with required general information and program policies and procedures will be completed and distributed.

Date to be Completed: 07/12/2017


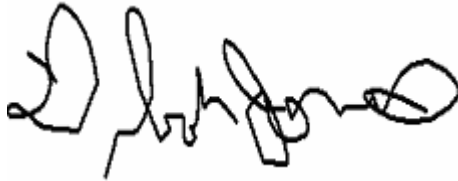
8.16.2.41 D, 8.16.2.42 D CHILDREN'S RECORDS	Compliance
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<p>8.16.2.41 E PERSONNEL RECORDS</p> <p><u>Deficiencies</u> The center does not have a written plan for ongoing professional development for each staff member.</p> <p>Regulation: 8.16.2.41(E)(1)(k)</p> <p><u>Corrective Action Plan</u> A written plan for employee development will be developed.</p> <p>Date to be Completed: 07/12/2017</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 2 out of 9 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.</p> <p>Regulation: 8.16.2.41E(1)</p> <p><u>Corrective Action Plan</u> The program will complete a file for each staff including substitutes and volunteers.</p> <p>Date to be Completed: 07/12/2017</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 9 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.</p> <p>Regulation: 8.16.2.41E(1)(d)</p> <p><u>Corrective Action Plan</u> The program will add dates of hire and termination to the record.</p> <p>Date to be Completed: 07/12/2017</p> <p><u>Deficiencies</u> The center failed to have 1 out of 9 person(s) providing care to sign an annual statement that they have, or have never had, an arrest or substantiated referral to a child protective services agency.</p> <p>Regulation: 8.16.2.41E(1)(f)</p> <p><u>Corrective Action Plan</u> The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction.</p> <p>Date to be Completed: 07/12/2017</p>	<p>Non-compliance</p>
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Administrative Requirements		
8.16.2.41 F PERSONNEL HANDBOOK	Not Inspected	
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 <u>Deficiencies</u> The program failed to keep a training log on file with employee's name, date of hire, position, date of training, clock hours, competency area, source of training, and training certificate for 5 out of 9 staff. See Staff Records 8.16.2.42 form for staff who are missing a complete training log. Regulation: 8.16.2.42C(3) <u>Corrective Action Plan</u> A training log will be completed for each staff that includes the employee 's name, date of hire, and position, date of training, clock hours of training, competency area, source of training, and training certificate. Date to be Completed: 07/12/2017 <u>Deficiencies</u> Current educators did not complete the Health and Safety Training; First Aid and cardiopulmonary resuscitation (CPR) certification training within three (3) months of their date of hire . Regulation: 8.16.2.42 C(2) <u>Corrective Action Plan</u> All educators, regardless of the number of hours per week, will complete the above listed training. Date to be Completed: 07/12/2017	Non-compliance	
Services & Care of Children		
8.16.2.43 A GUIDANCE <u>Deficiencies</u> Of the 9 staff's records reviewed, 7 is/are missing a signed staff acknowledgement that the guidance policy had been read and understood. See the Children's Records 8.16.2.41form for the child(ren) who have this missing. Regulation: 8.16.2.43A(1) <u>Corrective Action Plan</u> All staff's records will be reviewed to ensure a signed staff acknowledgement is on file. Date to be Completed: 07/12/2017	Non-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 G SWIMMING, WADING AND WATER	N/A	
8.16.2.43 H FIELD TRIPS	Not Inspected	
8.16.2.43 F OUTDOOR PLAY AREAS	Compliance	

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Food Service		
8.16.2.44 B MEALS AND SNACKS		Compliance
8.16.2.44 C KITCHENS Deficiencies A food in the fridge is not properly stored; the item is not in an airtight container; wrapped. Regulation: 8.16.2.44C(3) Corrective Action Plan The person responsible for food service will be instructed in proper food storage. Date to be Completed: 07/12/2017		Non-compliance
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		Compliance
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		Compliance
8.16.2.47 B PEST CONTROL		Compliance
8.16.2.47 C MECHANICAL SYSTEMS Deficiencies The program does not have hot and cold running water under pressure at all sinks in bathrooms. Regulation: 8.16.2.47C(6) Corrective Action Plan Hot and cold running water will be provided. Date to be Completed: 07/12/2017		Non-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
8.16.2.47 G SAFETY COMPLIANCE Deficiencies The program failed to conduct a fire drill for the month(s) of April. Regulation: 8.16.2.47G(2) Corrective Action Plan A monthly fire drill will be held and recorded. Date to be Completed: 07/12/2017		Non-compliance
8.16.2.47 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.47 G, I PETS		N/A

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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.			
			
	06/12/2017		06/12/2017
Surveyor: Mark Prizzi	Date	Facility Rep: Amanda Benavides	Date