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| Center Name: Marlene Ortiz | | Address: 3563 Placita Real Loop Santa Fe, NM 87507 | | | Phone: (505)316-6251 | | |
| License Number: 151398 | Issue Date: 03/15/2017 | Expiration Date: 03/14/2018 | Type: 2 Star Family Child Care Home | | Status: Licensed | | |
| Capacity | | | | Census | | | |
| Over Age 2: | 4 | Under Age 2: | 2 | Night Care: | 0 | Playground: | 0 |
| | | Over 2: | 5 | Under 2: | 1 | | |
| Days and Hours of Operation | | | | | | | |
| | <u>Monday</u> | <u>Tuesday</u> | <u>Wednesday</u> | <u>Thursday</u> | <u>Friday</u> | <u>Saturday</u> | <u>Sunday</u> |
| Opening Times: | 07:30 AM | 07:30 AM | 07:30 AM | 07:30 AM | 07:30 AM | Closed | Closed |
| Closing Times: | 05:30 PM | 05:30 PM | 05:30 PM | 05:30 PM | 05:30 PM | | |
| # of Classrooms: 1 | Purpose: Semi-Annual | | Date: 07/13/2017 | | Time: 11:00 AM | | |
| Comments | | | | | | | |

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

| Licensure | |
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| 8.16.2.31 A LICENSING REQUIREMENTS | Not Inspected |
| 8.16.2.31 B CAPACITY OF A HOME | Compliance |
| 8.16.2.31 C INCIDENT REPORTING REQUIREMENTS | Not Inspected |
| Administrative Requirements | |
| 8.16.2.32 A ADMINISTRATIVE RECORDS | Compliance |
| 8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT | Compliance |
| 8.16.2.32 C PARENT HANDBOOK | Compliance |
| 8.16.2.32 D CHILDREN'S RECORDS <u>Deficiencies</u> Of the 1 children's records reviewed, 5 is/are missing the date the child first attended the home. See Children's Records 8.16.2.32 form for the child(ren) with missing information and/or authorization. Regulation: 8.16.2.32D(1)(d) <u>Corrective Action Plan</u> The first attendance date will be added. Date to be Completed: 07/24/2017 <u>Deficiencies</u> Of the 5 children's records reviewed, 2 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.32 form for the child(ren) with no immunization/exemption. Regulation: 8.16.2.32D(1)(e) <u>Corrective Action Plan</u> The home will review a child's record to ensure complete information has been obtained before a child is admitted. Date to be Completed: 08/14/2017 | Non-compliance |
| 8.16.2.32 E PERSONNEL RECORDS | Non-compliance |

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Administrative Requirements

Deficiencies

The home does not have documentation of a background check within 5 years for care giver(s); person(s) over 18 years of age and older living in the home.

Regulation: 8.16.2.32E(1)

Corrective Action Plan

Documentation of a background check and employment history verification for all staff members and all adults living in the home. A background check must be conducted at least once every five years on all required individuals.

Date to be Completed: 08/14/2017

Deficiencies

Home educators do not have a signed statement that they would or would not be disqualified as a direct provider of care under the most current version of the Background Checks and Employment History Verification provisions pursuant to 8.8.3 NMAC.

Regulation: 8.16.2.32 E(2)

Corrective Action Plan

Documentation of an annual statement concerning disqualification will be obtained for each educator.

Date to be Completed: 07/07/2017

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| 8.16.2.32 F PERSONNEL HANDBOOK | Compliance |
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Personnel & Staffing

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| 8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS | Non-compliance |
| <p><u>Deficiencies</u></p> <p>Current educators did not complete the health and safety training within three (3) months of the date these regulations were promulgated.</p> <p>Regulation: 8.16.2.33 B(1)</p> <p><u>Corrective Action Plan</u></p> <p>All educators, regardless of the number of hours per week, will complete the above listed training.</p> <p>Date to be Completed: 08/14/2017</p> | |

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| 8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING | Compliance |
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Services & Care of Children

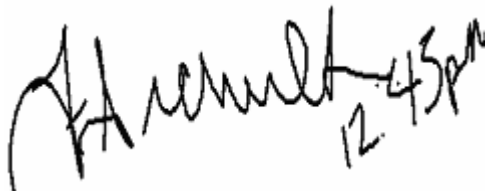

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| 8.16.2.34 A GUIDANCE | Compliance |
| 8.16.2.34 B NAPS OR REST PERIOD | Not Inspected |
| 8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS | Compliance |
| 8.16.2.34 D DIAPERING AND TOILETING | Compliance |
| 8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS | Compliance |
| 8.16.2.34 F NIGHT CARE | N/A |
| 8.16.2.34 G PHYSICAL ENVIRONMENT | Compliance |
| 8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT | Compliance |
| 8.16.2.34 I EQUIPMENT AND PROGRAM | Compliance |
| 8.16.2.34 J OUTDOOR PLAY | Compliance |

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| Services & Care of Children | | |
| 8.16.2.34 K SWIMMING, WADING AND WATER | | Not Inspected |
| 8.16.2.34 L FIELD TRIPS | | Not Inspected |
| Food Service | | |
| 8.16.2.35 B MEALS AND SNACKS | | Compliance |
| 8.16.2.35 C MENUS Deficiencies Weekly menus are not dated and posted in an area easily visible to parents . Regulation: 8.16.2.35C(1) Corrective Action Plan A dated weekly menu will be posted in an area visible to parents . Menus shall be posted at least one week in advance, in a conspicuous place, for review by parents, educators and children. Date to be Completed: 07/17/2017 | | Non-compliance |
| 8.16.2.35 D KITCHENS | | Compliance |
| 8.16.2.35 E MEAL TIMES | | Not Inspected |
| Health & Safety Requirements | | |
| 8.16.2.36 A HYGIENE | | Compliance |
| 8.16.2.36 B FIRST AID REQUIREMENTS | | Compliance |
| 8.16.2.36 C MEDICATION | | Not Inspected |
| 8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES | | Not Inspected |
| 8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES | | N/A |
| Buildings, Grounds & Safety | | |
| 8.16.2.38 A HOUSEKEEPING Deficiencies Toys and equipment for the two and under age group are not disinfected daily . Regulation: 8.16.2.38A(1) Corrective Action Plan Toys and equipment will be disinfected daily. Date to be Completed: 07/17/2017 Deficiencies The premises; furniture; floors in the Classroom are not safe in that cans left outside, toys on the floors causing a tripping hazzard. Regulation: 8.16.2.38A(1) Corrective Action Plan The safety violation will be corrected and a system for routine safety inspection developed. Date to be Completed: 07/17/2017 | | Non-compliance |

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| Buildings, Grounds & Safety | |
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| <p><u>Deficiencies</u> Debris was observed in the Home. Regulation: 8.16.2.38A(1)</p> <p><u>Corrective Action Plan</u> The home and premises will be kept free of debris. Date to be Completed: 07/17/2017</p> <p><u>Deficiencies</u> The Home has a heavy accumulation of art, cleaning supplies, papers. Regulation: 8.16.2.38A(1)</p> <p><u>Corrective Action Plan</u> A routine will be established to assess all areas of the premises for cleanliness , safety and potential hazards. Date to be Completed: 07/17/2017</p> <p><u>Deficiencies</u> Thedishes in the sink are not clean/disinfected as evidenced by dishes are not cleaned after meals. Regulation: 8.16.2.38A(1)</p> <p><u>Corrective Action Plan</u> Cleaning will be completed and a schedule for routine cleaning will be established. Date to be Completed: 07/17/2017</p> | |
| 8.16.2.38 B PEST CONTROL | Not Inspected |
| 8.16.2.38 C MECHANICAL SYSTEMS | Compliance |
| <p>8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL</p> <p><u>Deficiencies</u> Electrical outlets within reach of children in the home are not safety outlets and they do not have protective covers. Regulation: 8.16.2.38D(2)</p> <p><u>Corrective Action Plan</u> Protective covers will be added. Date to be Completed: 07/14/2017</p> | Non-compliance |
| 8.16.2.38 E EXITS | Compliance |
| 8.16.2.38 F TOILET AND BATHING FACILITIES | Compliance |
| 8.16.2.38 G SAFETY COMPLIANCE | Compliance |
| 8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES | Compliance |
| <p>8.16.2.38 I PETS</p> <p><u>Deficiencies</u> The home does not have a record of inoculations for a pet dog; cat in the home. Regulation: 8.16.2.38I(2)</p> <p><u>Corrective Action Plan</u> An inoculation record will be obtained and kept on file for future review. Date to be Completed: 08/14/2017</p> | Non-compliance |

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| <p>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.</p> | | | |
|  |  | 07/13/2017 | 07/13/2017 |
| Surveyor: Franchesca Archuleta | Date | Facility Rep: Marlene Ortiz | Date |